BLIND ASSISTANCE MANUAL

DIVISION OF PUBLIC ASSISTANCE
DEPARTMENT OF PUBLIC WELFARE
STATE OF INDIANA

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FORLWORD

This revised Blind Assistance Manual has been prepared for the purpose of assisting the county departments in the execution of their duties under The Welfare Act of 1936 as amended, in connection with the functions which they perform for the state department of public welfare in the administration of assistance to the needy blind. The experience of the county departments during the past two years with the forms and procedures issued by the division of public assistance has been taken into consideration in the revision and preparation of this manual.

It is believed that the revisions made will more satisfactorily meet the needs of the county departments and the state department in their efforts to attain an effective and efficient administration which will result in better services to applicants and recipients of blind assistance.

The manual includes copies of investigational and award forms with explanations for their use as prescribed by the state department; suggested procedures and practices to be followed in obtaining and verifying information for determining eligibility for assistance; procedures for estimating the amount of assistance to be granted; suggestions for case record keeping, making of awards, and services; and copies of the rules and regulations of the state department pertaining to the administration of blind assistance.

Many of the bulletins and instructions previously issued to county departments have been incorporated as part of this manual and in the future new or changed procedures will be issued as amendments or deletions to the manual material itself, rather than in bulletin form.

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CHAPTER I

INTAKE

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3. Clearance with Social Service Exchange

4. Index File

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CHAPTER I

INTAKE

GENERAL STATEMENT

The intake procedure is an introduction of the applicant to the county department and to the welfare program. It also provides for a beginning understanding of the applicant and his problems by the county welfare department. The specific details of the intake procedure will necessarily vary throughout the state, the variations being dependent upon the size of the county and the office facilities available. County departments may find it helpful to discuss intake methods with the district representative of the state department.

The person coming to the office of the county department, whether to make application for assistance or to obtain information relative to some phase of the welfare program, gains his first impression of the program and its administration through his first contact. This impression is apt to be a lasting one and on it is built his future relationship with the county department, whether this relationship develops into a long-time contact between the recipient and the department or ends as a casual one involving interpretation over a short period by the county department.

Throughout the whole of the intake process there is a valuable opportunity to establish good public relations and county departments should take advantage of this opportunity to interpret the program. The intake procedure likewise provides an opportunity for the county department to obtain certain factual data regarding the applicant which can be utilized to determine the services needed by him and to assist him in obtaining these services.

Intake procedure is thought of as covering that period of time from which the applicant comes to the office to request assistance until the beginning of the actual investigation by the visitor assigned to the case. This involves a clearance with the county department index file and with any existing social service exchange, the intake interview and the preparation of the application, the case folder, the desk card, where one is used, and registration of the case on DPW Form 2B (Revised), Register of Applications.

SECTION 1

PREPARATION OF APPLICATION, DPW FORM 40 (REVISED)

The applicant for blind assistance may be given two copies of the application, DPW Form 40 (Revised), to be filled out and returned to the county department, or he may be assisted in filling out these forms while in the office by an employee of the county department. The latter method is preferable, not only because it insures accurate execution of the application forms, but also because it offers an opportunity to answer any questions which the applicant may have in regard to the program.

I. FILLING OUT APPLICATION, DPW FORM 40 (REVISED)

The application, DPW Form 40 (Revised), is to be made out in duplicate and both copies must be identical. A separate application shall be filed for each blind person and each copy should be gone over carefully in the office of the county department to be certain that it is completely and properly filled out before investigation is started. The interviewer should supplement in narrative form (See Chapter II, Section 7, Narrative Recording) information which he obtains during the interview. It may be necessary for the interviewer to interpret to the applicant the reason for some of the information requested on the application form. Many future misunderstandings can be avoided by an adequate explanation as questions arise. Specific instructions for filling out the form are given below:

Item A. Indicate whether applicant is a man or a married or single woman by crossing out the two titles which are not applicable.

The full name of the applicant, and not his initials, should be written in the space following the title. (The person accepting the application in the county department should check to see that the spelling of the applicant's name in this space is the same as that of the signature of the applicant on the reverse side.)

Indicate race by striking out "white" or "colored" leaving the one which is applicable. If neither white nor colored, strike out both and write the name of the race which is applicable.

Fill in the month, day and year of birth of the applicant, together with name of city, town or county, state or foreign country in which born.

Give the street address or RFD number of the applicant's residence together with the city or town and township in which he resides.

Be sure to indicate by underscoring whether the application is being made for monthly assistance, eye treatment or both.

Strike out either "husband" or "wife" leaving the one which is applicable; if the applicant has never been married, strike out both.

Indicate present marital status by striking out "is" or "was" leaving the one which is applicable. If the applicant has been married on more than one occasion, but is not married at the time of application, the name of the last spouse only is necessary.

If the spouse is or was a husband indicate his full name; if a wife, substitute her maiden name for the last name.

Give month, day and year of birth of the spouse, together with the city, town, county, state or foreign country in which born.

Strike out "have" or "have not" leaving the one which is applicable and fill in the name of the county in which the application was filed.

Item B. 1. Fill in monetary value of applicant's interest in real property in the space indicated. Indicate in the appropriate space by check mark the manner in which the title is held. If the applicant has an interest in more than one piece of property, it may be necessary to check more than one item, but it is unnecessary to distinguish the monetary value of each. If title is in the name of the applicant alone, do not check any of the items. Indicate in the blank space the name or names of person or persons with whom property is held or name of applicant if title is in his name alone.

2. Indicate the total monetary value of all personal property which the applicant owns or in which he has an interest.

3. The applicant may have a cash income from more than one source. Indicate each source, the amount received from each, and whether it is computed by the week, month or year.

Item C. Strike out "am" or "am not", leaving the one which is applicable.

Item D. Strike out "have" or "have not", leaving the one which is applicable, or, fill in month, day and year when eyesight was lost.

Oath Fill in the name of the county to which the applicant is applying. Fill in the name of the county in which the oath was taken.

Applicant's signature should be the same as on the face of the application. If not, it should be written correctly below the signature itself just as when the signature is by mark (x). The person making the application must sign in the presence of officer or person taking the oath, and when signature is by mark (x), or is not in full as indicated on the face of the application, it must be witnessed by two persons who affix signatures and addresses.

Instructions for Filling in Box on the Face of the Application

The information in the box is to be filled in by the person responsible for registering the application on the Register of Application, DPW Form 2B (Revised).

The code and serial number are to be entered on the first line.

In the space following "date received" should be indicated the date on which the application is received by the county department. If the application is completed in the county office, this date will be the same as that on which it was signed.

After "received by" should be indicated the name or initials of the person filling out the box.

The date of mailing should be indicated in the space following "date application sent to the state department.

II. ALTERATION OF APPLICATION

Information given on the application, DPW Form 4 (Revised), by the applicant should never be changed nor should information be added either by the applicant himself or by any one in the county office after the application has been notarized. It is permissible for an applicant to make any additional changes necessary previous to the time oath is administered, but after the oath is once given, no change or alteration should be made. If after the application has been accepted and a number given it by the county department, it is found that it has not been properly and completely filled out, a new application should be made. No application, DPW Form 40 (Revised), once accepted and numbered, should ever be destroyed. An application is a legal document and great care should be used in preserving and safe-guarding it.

III. PERSONS AUTHORIZED TO ADMINISTER OATHS

Certain persons are authorized by law to administer oaths and a list of such persons with their jurisdictions is as follows:

Justice of the Peace - County wide
Notary Public - State wide
Judge of Court - Within his judicial jurisdiction
Prosecuting Attorney - State Wide
Member of Indiana General Assembly - State Wide
Mayor of City or Town - Within his city or town
Clerk of Circuit Court - County wide
Master Commissioner - County wide

Official Court Reporter - State Wide
Clerk of the Supreme Court - State Wide
United States Commissioner - State Wide
Town Clerk - Within his own Town
Clerk and Deputy Clerk of U.S. District Court - State Wide

A seal denoting the official character of the person administering oaths is generally used together with a statement showing the expiration date of his authority.

A county department employee may administer oaths within his own county in connection with welfare purposes if he has been authorized in writing by the county board to administer such oaths in accordance with provisions of Section 30 of The Welfare Act of 1936 as amended. County departments of public welfare may accept applications and affidavits to which an oath has been administered by employees of other county departments who have themselves been authorized to administer oaths in connection with the carrying out of the provisions of The Welfare Act.

IV. ROUTING OF APPLICATION FORMS

When completely filled out, signed and notarized, one copy of every application must be forwarded to the division of public assistance of the state department within seven days after filing in the county department.

The other copy is retained by the county department and filed in the case folder together with other papers pertaining to the case. From this copy the index card may be made; also the desk card where it is used.

'orm Prescribed by State Department of
'ublic Welfare and Approved by State Board of Accounts

DPW Form 40
(Revised)
3M-11-1-39

DEPARTMENT OF PUBLIC WELFARE

STATE OF INDIANA

APPLICATION FOR ASSISTANCE TO THE BLIND

(Applicant must prepare two (2) applications, each sworn to and each identical, and file both copies with the County Department of Public Welfare; each application must be either filled out in ink or typewritten, the signature of the applicant, owever, may be taken in indelible pencil.)

o the County Department of Public Welfare,

!.....County.

rint full name of applicant

DO NOT WRITE IN THIS SPACE

Application No. B..... (Code) (Serial)

Date received....., 19.....

Received by.....

Date application sent to State Department....., 19.....

Miss
Mrs.

. I, Mr..... (First) (Middle) (Last) .....white or colored (Strike out one)

Born on..... at..... (Mo., Day, Year) (City, Town or County) (State or Foreign Country)

Now residing at..... (Street Address or Other Designation) (City or Town) (Township)

State of Indiana, hereby apply for assistance to the blind and/or eye treatment (indicate by underscoring) under and subject to all the provisions and requirements of the Welfare Act of 1936 as amended and in support of said application represent and show the following:

My (husband) (wife) (is) (was)..... (First Name) (Middle Name) (Maiden or Last Name)

Born on..... at..... (Mo., Day, Year) (City, Town or County) (State or Foreign Country)

I (have) (have not) made a previous application for assistance to the blind in.....County.

. The following is a statement of the amount of property, both personal and real, in which I have an interest and of all income which I have at the time of filing this application:

1. The total value of my interest in any real property (land and improvements) is $.....; title to which is held,

   (1) as tenant by the entirety....., (2) as joint tenant....., (3) or as tenant in common.....,

   with..... (Fill in appropriate space.)

2. The total value of all personal property (stocks, bonds, notes, jewelry, farm machinery, household effects, etc.) owned

   by me or jointly with others is $.....

3. All money income which I am now receiving from any source whatsoever is as follows:

   (Source) (Amount, indicate whether for week, month or year)

   ..... $..... Per.....

   ..... $..... Per.....

   ..... $..... Per.....

. I (am) (am not) a citizen of the United States.

D. I (have) (have not) resided in the State of Indiana for a period of at least five years during the nine years, the last ye continuously, immediately preceding the date of this application.

E. 1. If granted assistance, I shall not, during the period of receiving such assistance, solicit alms.

2. I agree to notify and understand that I must notify the State Department of Public Welfare immediately if I becon possessed of any property or income other than that stated above.

3. In support of my belief that I meet the requirements of the state law for assistance to blind persons, I will, when r quested, supply such information as I can to persons authorized by law to request such information, and I request m relatives, my lawyer, my physician, my banker, and any other persons having information concerning me personally concerning my circumstances to furnish any and all such information to such persons.

4. I understand that no assistance shall be granted under this application until I have submitted to an examination by a eye physician in accordance with Section 57 of the Welfare Act of 1936.

5. I understand and agree that any assistance granted to me, together with three per cent interest thereon, becomes claim against my estate, which shall have priority over all general claims.

STATE OF INDIANA)
) ss:
..... COUNTY)

I do solemnly swear (or affirm) that all statements made in the foregoing application are true and correct as I veril believe, so help me God. (If applicant affirms, the words "solemnly" and "so help me God" should be crossed out.)

Applicant must sign in presence of officer or person taking the oath, and when signature is by mark (x), or is not in full as indicated on the face of the application, it must be witnessed by two persons who affix signatures and addresses.

.....
Applicant's Signature in Full

Witnesses: ....
Name Address

....
Name Address

Subscribed and sworn to before me this.....day of....., 19.....

(SEAL) .....
(Signature of Officer or Person Administering Oath)

.....
(Title)

My commission expires....., 19.....

My authorization expires....., 19....., and is in full force and unrevoked.

Your oath may be taken by either a Notary Public, or public official authorized to take oaths, or it may be taken by an employe of the State or County Welfare Department who has been authorized to take oaths without charge.

You may fill in your own application or have a relative or friend do it for you. No person can make any charge or collect fee for making the application for you or for submitting it to the County Department of Public Welfare.

SECTION 2

REGISTRATION ON DPW FORM 2B (REVISED), REGISTER OF APPLICATIONS

A register is maintained in each county department of public welfare, separate registers being provided for aged assistance, assistance to the blind, and aid for dependent children. Contained in the registers is a record of the formal application of all persons applying for assistance.

I. ASSIGNMENT OF APPLICATION NUMBERS.

An application number is given every accepted new application. The application, DPW Form 40 (Revised), and all subsequent forms pertaining to the case bear that number. Likewise, all subsequent reapplications bear the same number, for a case once numbered retains the same number no matter how the status changes. The application or case number consists of the type, code, and serial numbers.

A. Type Symbol

The type symbol is determined by the type of assistance requested by the applicant. For blind assistance the type symbol is the letter "B".

B. Code Numbers

Code numbers have been assigned the several county departments by the state department of public welfare as follows:

1 Adams	22 Floyd	43 Kosciusko	64 Porter
2 Allen	23 Fountain	44 LaGrange	65 Posey
3 Bartholomew	24 Franklin	45 Lake	66 Pulaski
4 Benton	25 Fulton	46 LaPorte	67 Putnam
5 Blackford	26 Gibson	47 Lawrence	68 Randolph
6 Boone	27 Grant	48 Madison	69 Ripley
7 Brown	28 Greene	49 Marion	70 Rush
8 Carroll	29 Hamilton	50 Marshall	71 Scott
9 Cass	30 Hancock	51 Martin	72 Shelby
10 Clark	31 Harrison	52 Miami	73 Spencer
11 Clay	32 Hendricks	53 Monroe	74 Starke
12 Clinton	33 Henry	54 Montgomery	75 Steuben
13 Crawford	34 Howard	55 Morgan	76 St. Joseph
14 Daviess	35 Huntington	56 Newton	77 Sullivan
15 Dearborn	36 Jackson	57 Noble	78 Switzerland
16 Decatur	37 Jasper	58 Ohio	79 Tippecanoe
17 DeKalb	38 Jay	59 Orange	80 Tipton
18 Delaware	39 Jefferson	60 Owen	81 Union
19 Dubois	40 Jennings	61 Parke	82 Vanderburg
20 Elkhart	41 Johnson	62 Perry	83 Vermillion
21 Fayette	42 Knox	63 Pike	84 Vigo

85 Wabash	87 Warrick	89 Wayne	91 White
86 Warren	88 Washington	90 Wells	92 Whitley

C. Serial Numbers

A serial number is given each application, in sequence, as listed on the Register of Applications, DPW Form 2B (Revised). If the applicant after withdrawal or rejection, reapplies he is given his original serial number.

Example - - A person applying for blind assistance in Adams county, whose serial number is "8", would be numbered as follows: B-1-8. A person applying for blind assistance in Washington county, whose serial number is "5", would be numbered B-88-5.

II. INSTRUCTIONS FOR FILLING OUT DPW FORM 2B (REVISED), REGISTER OF APPLICATIONS

Immediately upon completion of the application for blind assistance, DPW Form 40 (Revised), the application should be registered in the Register of Applications for Blind Assistance, DPW Form 2B (Revised).

Date Application Filed

Indicate the date of present application.

County Code Number

Enter code number of county

Application Serial Number

If applicant has not previously applied for blind assistance in the county in which he is now applying, enter the new serial number assigned his application. If he has previously been an applicant or recipient in the county in which he is applying, enter the same serial number as was assigned to his original application.

Name

Indicate full name of applicant including surname, first name, and middle name.

Sex

Enter "M" for male, and "F" for female.

Cleared by (Initials)

Record the initials of the person who has cleared the application with the index card file.

New Application, Previous Rejection, or Previous Withdrawal.

If the applicant has not previously been a recipient of blind assistance, enter "new". If the applicant has previously received blind assistance, indicate whether this assistance was previously withdrawn before the beginning of the present state fiscal year, or since the beginning of the present state fiscal year. This can be entered as follows: "Prev. With'n Before July 1" or "Prev. With'n Since July 1".

Visitor Assigned To

Enter the name or initials of visitor to whom case is to be assigned.

Visitor Reassigned To

If the case is later transferred to another visitor, the name or initials of the new visitor will be entered. This item need not necessarily be filled out unless the county department finds it helpful.

Recommendation of County Department

Date of Action

If recommendation is for award or rejection, enter date of first action of county board.

Award, Rejection, or Other Disposition

If award or rejection, enter as such.

Action of State Department

Date of Action

If award or rejection, enter date of first action of state board.

Award, Rejection or Other Disposition

If award or rejection, enter as such.

THE COUNTY DEPARTMENT O

OF.....

STATE OF IND

REGISTER OF APPLICATIONS FO

LINE NO. (1)	DATE APPLICATION FILED (2)	COUNTY CODE NUMBER B-..... APPLICATION SERIAL NO. (3)	NAME (4)	SEX (5)	CLEARED WITH INDEX FILE	
					CLEARED BY (INITIALS) (6)	NEW APPLICATIO PREVIOUS REJECT OR PREVIOUS WITHDRA (7)
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2						
3						
4						
5						
6						
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9						
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23						

Form Prescribed by State Department of Public Welfare and State Board of Accounts

DPW Form 2B
(Revised—for blind applicants only)
2M—8-1-39

THE COUNTY DEPARTMENT OF PUBLIC WELFARE

OF.....COUNTY

STATE OF INDIANA

REGISTER OF APPLICATIONS FOR AID TO THE BLIND

LINE NO. (1)	DATE APPLICATION FILED (2)	COUNTY CODE NUMBER B-..... APPLICATION SERIAL NO. (3)	NAME (4)	SEX (5)	CLEARED WITH INDEX FILE		VISITOR ASSIGNED TO (8)	VISITOR REASSIGNED TO (9)	RECOMMENDAT'N OF COUNTY DEPT.		ACTION OF STATE DEPT.	
					CLEARED BY (INITIALS) (6)	NEW APPLICATION, PREVIOUS REJECTION OR PREVIOUS WITHDRAWAL (7)			DATE OF ACTION (10)	AWARD, REJECTION OR OTHER DISPOSITION (11)	DATE OF ACTION (12)	AWARD, REJECTION OR OTHER DISPOSITION (13)
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SECTION 3

CLEARANCE WITH SOCIAL SERVICE EXCHANGE

After clearance in the master index file and registration on DPW Form 2B (Revised), in those communities in which there is a social service exchange, the application will be cleared to learn whether the applicant is known to any of the other agencies. By providing the exchange with identifying information concerning the applicant, his name can be registered as having made application to the county department for blind assistance.

When the copy of the exchange notice concerning registration with other agencies is returned to the county department, the information is entered on the Face Sheet, DPW Form 4 (Revised).

In communities where there is a social service exchange, county departments should clear all cases applying for assistance in order to secure information which will be helpful during the investigation and to know the agencies which have served or are serving the applicant at the time of clearance.

SECTION 4

INDEX FILE

I. GENERAL STATEMENT

The index file is a necessary part of the efficient organization of the county department and will serve a number of purposes. An index card, DPW Form 3 (Revised), must be made out for each blind person applying for assistance. The same card may be used for cross reference purposes, but if the county department prefers to use a card intended for cross reference only, this plan may be discussed with the district representative, and such cards obtained from the state department upon request.

A. USE OF FILE

Some of the needs of the county department met by the index file are as follows:

1. Alphabetical index to case records which are filed numerically or alphabetically.

2. Index of cases assisted by the county department.

3. Record of current status of case.

4. Source of information for maps, surveys, etc.

5. Method of avoiding duplication of assistance.

B. OPERATION OF FILE

The index cards and cross reference cards, if used, will be combined in one alphabetical file. In this manner a card for any person can be located by name. Through the use of these cards further information can be obtained from the case folder which is filed in a numerical or alphabetical file.

Some of the information on the index card can be obtained from the application form but the completion of the card will depend upon the gathering of additional information at the time of the intake interview or home visit.

The information on all the cards should be kept current as the status of the case changes from application to closing. It will be necessary for each county department to devise some method for keeping the person responsible for the index file apprised of these changes as they occur. In most instances knowledge of necessary changes will come to

the attention of the visitor responsible for the case through his contacts with the family, and it will be his obligation to notify the proper person.

II. PREPARATION OF INDEX CARD

Surname

Indicate last name of applicant.

Birthdate

Give month, day and year of birth of applicant.

Race

Indicate white by "W" and negro by "N". If other, specify.

Sex

Indicate male by "M" and female by "F".

Application No.

Indicate type, code and serial number of the applicant's case in the county in which he is applying.

The other spaces below "Application No." may be used to indicate case numbers of other persons listed on the card who may be applicants or recipients under The Welfare Act, or receiving service through the county department. The number which identifies the person on the card should be indicated under "Of". It may also be used to indicate the case number of the applicant, if he has been an applicant or recipient in another county, or under some other category of assistance.

F. N.

Enter first name of applicant.

M. N.

Enter middle name of applicant.

Address

Enter the mailing address at which the applicant is to live when the first check is received.

Hu.-Fa. - Husband-Father

"Hu." only is applicable for blind assistance cases. If the applicant is a woman, enter here the full name of her present or last husband.

W.Mo. - Wife-Mother

"W". only is applicable for blind assistance cases. If the applicant is a man, enter here the full name of his present or last wife. If the applicant is a woman, enter her maiden name in the appropriate space.

Person in Loco Parentis

Not applicable in blind assistance cases.

Birthplace

"M's". If the applicant is a man and born in the U. S., give city or county, and state of birth. If not born in the U. S. give the country of birth. If the applicant is not a man, indicate here the birthplace of the person named after "Hu.-Fa."

"W's". If the applicant is a woman and born in the U. S., give city or county, and state of birth. If not born in the U. S. give country of birth. If the applicant is not a woman, indicate here the birthplace of the person named after "W.-Mo.".

Alias

Enter any other names by which applicant is known, or any other spellings of his name used by him.

Members of Family

The applicant's name should not be listed again. Enter full name of all other members of the household.

Birthdate

Enter day, month and year of birth of each member of the family.

Kin - To

Relationship should usually be indicated as to the applicant. If some member of the household is not related to the applicant, but is related to some other member of the family, this may be indicated by listing the number of the person to whom he is related in the column "To".

Date Case Opened

This column is to be used in indicating the date on which the application was filed in the county office.

Date Case Closed

Date on which the county board approved the rejection of an application or the withdrawal of an award if the visitor also withdraws all service to the case at the same time. There will be some cases in which the visitor will continue to give some form of service even though financial assistance is not being given, and cards for these cases should not be marked "closed" until the visitor indicates that the case is no longer active.

INDEX CARD, DPW FORM 3 (REVISED)

1 SURNAME	BIRTHDATE	RACE	SEX	APPLICATION No	OF
F.N.	M.N.				
ADDRESS					
2 HU.—FA.					
3 W.—MO.	MAIDEN NAME				
4 PERSON IN LOCO PARENTIS					
BIRTHPLACE	ALIAS				
M's					
W's				DATE CASE	
MEMBERS OF FAMILY	BIRTHDATE	KIN	TO	OPENED	CLOSED
5					
6					
7					
8					
9					

THE INDEX CARD IS TO BE USED FOR THE REGISTRATION
OF ALL CASES BY THE COUNTY DEPARTMENT

P-3743-8-18-39

SECTION 5

DESK CARD

The desk card is intended primarily for the benefit of the visitor and should be of valuable assistance to him in setting up a file of individual case information for his own convenience. The use of the desk card is optional with the county departments, and the manner in which it is used, if adopted, will vary to a degree, depending upon the size of the county and methods of operation in the county department. The visitor can adapt the desk card to the situation which he meets in his own caseload and will probably find that from time to time it will lend itself to additional uses.

I. PURPOSE OF DESK CARD

The desk card can be of service to individual workers and to the county department in the following uses which are not an inclusive list and which may alter as statistical procedures or other procedures change from time to time.

1. Assignment of cases.
2. Use as a visiting card.
3. Record of open case load.
4. Brief and readily available picture of the case status.
5. Available material relating to social data on open case load.
6. Means of promoting responsibility for case load problems, individually and in a case group.
7. Use as a reminder for dictation and a record of dictation completed on each individual case.
8. Review of case load activity.

II. USE OF CARD

If desk cards are used, it will be found helpful to maintain one for every open case under care, whether or not financial assistance is being given. A set of desk cards representing each worker's current open case load is thus available to each visitor, in a card file. Some workers may prefer keeping the cards in a loose-leaf binder (or in a desk box and only the cases to be visited any one day in the binder) which may be taken to the field with the worker.

III. PREPARATION OF CARD

If desk cards are used they should be prepared by the clerk-stenographer or stenographer on the basis of entries in the application register. (It may be necessary for the clerk-stenographer to enter on the desk card that amount of pertinent information which is available from the application register, and the additional information be placed on later by the worker). If this procedure is followed continually as applications are received, withdrawn, rejected or transferred to other workers, the desk card will represent a control and current list of open cases under care.

IV. FILLING OUT CARD

The desk card should be prepared as completely as possible in typewritten form as soon as the individual has made an application and the case has been assigned to a particular worker for investigation. Additional information may have to be added in longhand after the investigation has been completed and the case has either been granted an award or rejected. The desk card should always reflect the status of the open cases, and should be kept current with regard to the address, members of the household, and type or category of case.

Name

Enter applicant's surname, followed by the first and middle names.

Race

White, negro, or "other" (specify).

Sex

Indicate "M" or "F" for male or female.

Marital Status

Check the marital status which applies to the applicant.

"Mar" - married
"S" - single
"Wid" - widow
"Div" - divorced
"Sep" - separated
"Des" - deserted
"Widr"- widower

The other designations are not applicable to blind assistance cases.

Address

Enter the mailing address at which the applicant is to live when the first check is received. Sufficient space has been allowed to provide for a change of address, if the recipient should move.

Members of Family

The applicant named on the first line should be listed again as a member of the family. The husband or wife of the applicant should be listed on the second or third lines. The remaining lines may be used to list members of the immediate household or members of the applicant's family.

Kin

Indicate relationship to applicant in this space.

Birth Date

Give day, month and year of birth.

Address

If the person is a member of the household, indicate that the address is the same as that given for the applicant. Otherwise, give street or RFD number, city or town and state.

Application No.

On the first line indicate the type, code and serial number of the applicant's case in the county in which he is applying. On the lines below may be listed application numbers of other persons named on the desk card, if they have applied for any type of assistance. The number which identifies the person on the card may be indicated under "of".

Foster Parents or Institutions - Address - Kin - To

Not applicable to blind assistance cases.

Physical Condition

Indicate any diagnosed illness of a relatively permanent nature or any handicapped condition. The number which identifies the person on the card may be indicated under "No."

Application or Referral Date

Indicate the date of most recent application.

Date Accepted

This column is to be used for indicating the date on which the state board approved the granting of an award.

Date Closed

Date on which the state board approved the rejection of an application or the withdrawal of an award. There will be some cases in which assistance is withdrawn, but the visitor may continue to render some type of service to the client. Such cases should not be marked closed until the visitor is no longer contacting them.

Reason for Closing

Specify the principal reason for rejection or withdrawal.

Budget Allowance

On the back of the card are a series of columns for indicating changes in the budget allowance. The dates for each column are to be inclusive dates. When a change is made in the award the effective date will be indicated in the first column following the date when the granting of the award became effective. The effective date of the change will then be used as the beginning date for the next column and the new budget allowance will be recorded under it. The budget as recorded in this space should be the final itemized budget as approved by the state board.

Visit Control

This space is provided for the use of the visitor in any way which may seem helpful. One suggestion is that it be used as a space for making notes in regard to future contacts which the visitor desires to make on a case. It is also a means of checking quickly to see when a contact was last made, if a brief note is made on the card indicating date and type of contact. This may be useful either for visiting or dictation purposes. Visitors may think of still other ways in which this space may be utilized to the best advantage.

V. MAINTENANCE OF CARDS

If desk cards are used, it is extremely important that they be maintained on a current and accurate basis. Cards should be issued the case workers only on the basis of the entries in the application register or the record which designates the transfer of cases between workers or districts.

A. CHANGE IN STATUS

Change in status may mean a change in the name, in the number receiving

assistance, or in any of the several factors which are recorded on the card. Usually when such changes are necessary on the desk card, they are also necessary on the index card, DPW Form 3 (Revised), and on the Face Sheet, DPW Form 4 (Revised).

B. CARDS OF CLOSED CASES

When a case is being closed, the visitor should remove the desk card from his files, indicate the date and reason for closing on the card and route the card, with the case folder, to the supervisor or director, then to the clerk-stenographer for handling. The clerk-stenographer will then file the closed desk card, either in the closed case file, or in a separate file for such closed case cards, according to the procedure which is most practical in the county department. Cards removed from the visitor's file because of closing or transfer to another worker in the organization should reach their destination only by being routed to the case supervisor or director where they should be cleared with the index file, to the new worker, or into the closed case folder and file. (If the desk card of a case being closed is filed in the case folder, it will not be necessary when the case is reopened to search through several different files to obtain all the information regarding it.)

VI. FILING OF CARD

The cards can be kept in alphabetical order, or by categorical arrangement within alphabetical order, or can be arranged in any method that seems most usable. Where the alphabetical system is used, guide cards should be provided for the various categories. Individual cards should be filed behind the guide cards in alphabetical order, according to the surname and the given name of the applicant for blind assistance.

VII. TRANSFER BETWEEN WORKERS OR DISTRICTS

If, for any reason such as change of address, it becomes necessary to transfer the case to another visitor within the organization, the director or case work supervisor, after making the necessary determination, will route the desk card and the case record to the visitor who is to handle the case in the future. In some county departments this will mean the referral of the records from the supervisor for assignment to another visitor in the new district.

VIII. LOSS OF CARD

If a desk card is lost, another may be prepared by the stenographer at the request of the visitor, and would be marked "duplicate", with the date

of preparation immediately under. Before doing so, however, the case name should be checked with the index file to be sure the case is open. If the original card is later found, all information should be transferred to it from the duplicate, which should then be destroyed.

First	Middle	Race	Sex	Mar	S	Wid	Div	Des	Sep	Um	WDR	Imp	P.I.	M.I.

Family	Kin	Birth Date	Address	Applic. No.	Of

ts or Institutions	Address	Kin	To	Physical Condition	No.

Date	Date Accepted	Date Closed	Reason for Closing

DPW Form 74

Food					
Clothing					
Shelter					
Fuel					
Utilities					
Household					
Health					
Insurance					
Recrcation					
Personal Service					
Board					
Miscellaneous					
Total					

VISIT CONTROL

60M—11-1-39

SECTION 6

CASE FOLDER AND COMPOSITION OF CASE RECORD

A folder should be made for each case accepted for investigation to preserve the recorded information. It should contain all information compiled by the county department pertaining to the applicant for blind assistance. Each county department should also devise some method of retaining records of interviews with persons whose applications are not accepted. If the interviews are fairly complete, county departments may wish to make case folders for these rejected applications.

I. INFORMATION ON THE FOLDER

On the tab of the folder is entered the type, code, and serial number of the application, and the applicant's surname, first and middle names. It is better to type this information since with constant use any other means of entry may not be durable. If folders are made for those cases where a formal application has not been completed, the tab of the folder will bear only the name and address of the applicant since the applicant will have been assigned no application number.

II. MAKEUP OF FOLDER

There are various ways of fastening portions of the case records together and county departments may want to investigate the devices and clips which are available and which vary in efficiency and price. In general there are two methods of retaining the record in the folder:

A. In one method the material can be inserted in the folder in sections with pertinent information separated and clipped together but not fastened to the folder itself. Thus the face sheet should be on the top of one portion together with the statement of verifications and the narrative record, the most recent sheet of the narrative record being on the bottom so that it could be detached and further information added to it. The other section of the record would have clipped together all other forms and all correspondence relating to or received from the applicant in chronological order. Flat-headed paper fasteners which are inserted through holes punched in the various sheets can be used for securing material in sections and can be ordered in various sizes. These have proven more satisfactory than paper clips or staples as additional pages can be easily added and the fasteners do not allow the loss of pages.

B. In another method the case record material can be secured to the folder sides so that the right side holds the face sheet, the statement of verifications, and the narrative record. The remaining section of the record consisting of all other forms and all correspondence from or

concerning the applicant would be secured to the left side of the folder and filed chronologically. Metal corner clips have been found very useful in this method of filing and allow the insertion of additional pages.

III. MATERIAL IN FOLDER

The average case record will contain much of the following material which is listed in such a way as to suggest a division into two sections:

Application for Blind Assistance, DPW Form 40 (Revised)

Face Sheet, DPW Form 4 (Revised)

Notice to Report to Eye Physician, DPW Form 44

Statement of Verifications, DPW Form 5 (Revised)

Physician's Report on Eye Examination DPW Form 45

Narrative Record

Decision of State Supervising Ophthalmologist on Blind Assistance Case, SDPW Form 1256

Copies of All Correspondence from or Concerning the Applicant for Blind Assistance

Rejection of Application for Blind Assistance, DPW Form 51

Data from Responsible Relative, DPW Form 11 (Revised)

Bank Clearance, DPW Form 14

Budget and Recommendation Form, DPW Form 5A (Revised)

Certificate of Award for Blind Assistance, DPW Form 52

Certificate of Change of Award for Blind Assistance, DPW Form 53

Withdrawal of Blind Assistance, DPW Form 54

Notice to Township Trustee of Assistance Given, DPW Form 16

IV. FILING OF FOLDERS

In accordance with Regulation 2-109 the case folders shall be filed as follows:

A. "Active File, Blind". In this file will be contained all folders of persons receiving blind assistance and persons who have applied for assistance, but on whose cases no action has been taken. These folders will be filed in numerical order by application number or alphabetically as the county department desires.

B. "Inactive File, Blind". Filed here numerically by application number will be folders of those persons who have been denied assistance or from whom assistance has been withdrawn. If folders are made to contain information about those persons who have not completed formal application, they should also be filed in this section, but since they are not assigned a number, they should be kept in alphabetical order in one section of this file.

The inactive file should be kept as one unit, but if it will operate more efficiently, the county department may subdivide the active file in accordance with the case loads of visitors.

V. REMOVAL OF FOLDERS FROM FILE

Whenever it is necessary to obtain information from the record the entire case folder should be removed from the file for the period of time it is needed and then returned. In order to insure return and be certain of the location of records it is suggested that county departments work out some means within the county office to insure that records may be readily located. One method is to insert in place of the folder which has been removed, a substitute card bearing the name of the employee of the county department who has assumed responsibility for the record and the date when the record was removed.

Used folders can be utilized and if a colored paper is pasted over the tab, the cases withdrawn from the file can be easily distinguished.

CHAPTER II

INVESTIGATION

Section 1. Procedure Prior to Home Interview

2. Interviewing

3. Face Sheet, DPW Form 4 (Revised)

4. Verifications

5. Standard Resource Allowance

6. Budget Estimates, DPW Form 19; Budget Guide, DPW Form 49 (Revised); Budget and Recommendation Form, DPW Form 5A (Revised)

7. Narrative Recording

CHAPTER II

INVESTIGATION

I. GENERAL STATEMENT

During the period of investigation, it is essential that the visitor be aware of three major responsibilities: (1) to establish and maintain an understanding relationship with the applicant, (2) to interpret correctly the functions of the program to all persons and agencies with whom contacts are made in connection with the investigation, and (3) to collect completely and analyze carefully all factual material needed to arrive at a fair decision on each individual case.

The attempt to obtain the confidence of the applicant and to understand his needs necessitates realization by the visitor of the applicant's feeling of insecurity during the investigation process. He has taken the initiative in filing his application, but the outcome of this step is still obscure. The applicant may be in real need during the time which the visitor must use to complete the necessary inquiries, and the visitor who is conscious of the strain which such uncertainty brings, will be more understanding in his approach to the situation.

During the investigation process it will be necessary for the visitor to contact many persons other than the applicant. These persons may be relatives, employers, friends, physicians, or representatives of other agencies and will have varying degrees of knowledge in regard to the blind assistance program. The visitor should make use of such opportunities to clarify false impressions and to outline clearly the scope of work of the department. The period of investigation as outlined in this chapter of the manual begins when the case is received by the visitor and continues until a recommendation is made by the county board in regard to the application. The process involves determination of blindness by an examination by an eye physician approved by the state department and interviews by the visitor with the applicant and other persons who have necessary information to contribute. The visitor is responsible for completing the Face Sheet, DPW Form 4 (Revised), the Verification Form, DPW Form 5 (Revised) the narrative report, and the Social Data Card, DPW Form 124 (Revised) or DPW Form 127. In some counties the visitor will be responsible for giving or mailing to the applicant the Notice to Report to Eye Physician, DPW Form 44, for checking the application, DPW Form 40 (Revised) and the Physician's Report on Eye Examination, DPW Form 45, and in some cases for completing the Report on Applicant for Blind Assistance after Submission of Application, DPW Form 42, or the Report on Applicant for Blind Assistance after Eye Examination, DPW Form 46.

SECTION 1

PROCEDURE PRIOR TO HOME INTERVIEW

I. RECOMMENDATION FOR APPOINTMENT OF EYE PHYSICIAN, DPW FORM 43

The eye examination is a very important part in the procedure for administering assistance to the blind and it is highly important that qualified and competent eye physicians be selected to make the examinations. Section 57 of The Welfare Act of 1936 provides that the eye examination must be made by "an ophthalmologist or eye specialist who shall be a physician licensed to practice medicine, surgery and obstetrics in this state", and who has been approved by the state department. Regulation 2-201 (Revised 8-11-37) provides that the county director shall recommend to the state department one or more eye specialists as qualified to give eye examinations, using DPW Form 43, Recommendation for Appointment of Eye Physician. (See sample form at end of this Section).

Three copies of this form should be made; two copies should be sent to the state department and one kept in the county department. The information for DPW Form 43 can be obtained from the physician. The state department will notify the county department by letter of the approval of the eye physician, and no county department shall use an eye physician who has not been approved by the state department.

II. REPORT ON APPLICANT FOR BLIND ASSISTANCE AFTER SUBMISSION OF APPLICATION, DPW FORM 42

Before the investigation is begun the application should be checked carefully. When it is apparent from the face of the application that the applicant is ineligible because of failure to meet age, residence, or other requirements, the state department is notified by use of DPW Form 42, Report on Applicant for Blind Assistance after Submission of Application. (See sample form at end of this Section). DPW Form 42 should be made in duplicate. One copy shall be sent to the division of public assistance of the state department and one copy shall be filed in the case record of the county department. DPW Form 42 should not be used to recommend rejections for reasons not shown in the application. In no case should a county department notify a blind person that his application has been rejected since this is the responsibility of the state department.

III. EYE EXAMINATION

A. Notice to Report to Eye Physician, DPW Form 44

If from the face of the application it is not apparent that the applicant is ineligible, the next step is to determine the eligibility of the applicant in respect to his eyesight. This will be done in accordance with State Department Regulation 2-203.

A copy of DPW Form 44, Notice to Report to Eye Physician, should be sent or given to the applicant, advising him to report to one of the approved eye physicians. (See sample form at end of this Section.) This form makes an appointment for the applicant with the eye physician so that it will be necessary for the person filling out the form to know the office hours of the eye physician. DPW Form 44 is to be made in quadruplicate: one copy to be sent or given to the applicant, one copy to be sent to the eye physician who will conduct the examination, one copy to be sent to the division of public assistance of the state department along with the Physician's Report on Eye Examination, DPW Form 45, and one copy to be retained in the office of the county department to be filed with the case record.

B. Physician's Report on Eye Examination, DPW Form 45 (Revised)

The approved eye physician shall report the results of his examination of the applicant on DPW Form 45 (Revised), Physician's Report on Eye Examination. (See sample form at the end of this Section.) DPW Form 45 (Revised) shall be made in quadruplicate: one copy to be retained by the physician making the eye examination, and three copies to be returned by him to the county department of public welfare. Two copies, the original and first carbon of the three returned to the county department, shall be forwarded to the division of public assistance of the state department, together with a copy of the Notice to Report to Eye Physician, DPW Form 44. A copy of the report of the eye examination shall not be given to the applicant, as it is the responsibility of the state department to make all such reports to the applicant.

DPW Form 45 (Revised), Physician's Report on Eye Examination, is a form designed primarily for the use of the examining physician. The information it requires, aside from the identifying information of name, address, age and case number is technical and pertains to the topographical and etiological factors which have resulted in the degree of vision recorded. This information should be given in full by the examining physician, as it is necessary in planning for the future of the assistance and eye treatment programs. Also, it is through accumulated knowledge of conditions, which interfere with vision, and the causes of these conditions that work may be planned to eradicate any of these causative factors.

Since under the Welfare Act of 1936, a person shall be considered blind who has vision in the better eye with correcting glasses of 20/200 or less, DPW Form 45 (Revised) under the heading of Central Visual Acuity, reports the measurement of the central vision of the applicant in terms of Snellen notations. In testing for distance, the first numeral (20/---, 15/---, 10/---) indicates the distance of the applicant from the test letters. The second numeral (---/400, ---/200, ---/100) indicates the size of the letter the applicant can recognize at the testing distance, ---/400 being larger than

---/200 and ---/200 being larger than ---/100, etc. The standard testing distance is 20 feet (20/---). The largest letter on the usually employed testing charts is about 3½ inches square. In the test the applicant is to read as many letters which progressively decrease in size as he may recognize. When an applicant does not read 20/200 or better the largest letter (---/200) is brought nearer and nearer until it can be recognized; the distance so found is recorded as 16/200, 12/200, 8/200, or whatever the actual distance is found to be.

Not only must the central visual acuity be considered in determining the degree of blindness but the field of vision or the peripheral vision must be considered, as an applicant who has central vision of better than 20/200 in either eye cannot be qualified for assistance on that point, but may nevertheless, become qualified if the widest diameter of the visual field is contracted to twenty degrees or less. The disqualifying visual defect will be indicated on the DPW Form 45 (Revised) by a statement in terms of degrees of whatever visual field is preserved.

Formerly the physician was asked to submit a complete chart for the eye with the limiting defect and this field chart indicated the limitation. If the doctor did not submit a field chart, he indicated the limitations of the field by designation on the quadrants provided for the right and left eye. It will no longer be necessary to use these diagrams for indicating field defects, as direct answers will be given in the spaces provided on the form under "Peripheral vision."

C. Review of Physician's Report on Eye Examination, DPW Form 45, by State Supervising Ophthalmologist

The state supervising ophthalmologist acts in the capacity of a medical advisor and consultant to the state department of public welfare and to the examining physicians. His duties are specifically outlined and are concerned only with the medical aspects of the program. It is his responsibility to review the DPW Form 45, to determine whether or not, from the material submitted, the individual is blind within the meaning of the definition, and whether eye treatment should be recommended. The decision of the state supervising ophthalmologist will be made from the diagnosis, prognosis and Snellen notations, as reported on DPW Form 45 and any supplementary information received from the examining physician. If there is any inconsistency in the report which makes it impossible for the state supervising ophthalmologist to approve the report as it stands, the examining physician will be asked to submit additional information for the completion or clarification of the eye report. If additions are made to the eye report by the original examiner, a copy of the completed or clarified eye report will be sent to the county department accompanied by SDPW Form 1256. The state supervising ophthalmologist is used also in a consultative capacity in regard to the advisability of and the arrangement for eye treatment.

D. Use of SDPW Form 1256, Decision of State Supervising Ophthalmologist on Blind Assistance Case

After the state supervising ophthalmologist reviews the DPW Form 45, Physician's Report on Eye Examination, he will attempt to determine, after evaluating the recorded material, whether or not the individual is blind within the meaning of the definition and whether the person should be considered for temporary eye treatment. His decision is recorded on the SDPW Form 1256, the duplicate copy of which is sent to the county department to become a part of the case record so that it may be checked by the district representative at the time the record is being reviewed. The original copy will be kept in the state department. The answer to "Is the applicant blind within the meaning of the definition?" will be the state supervising ophthalmologist's decision and will be considered as final, even though it is contradictory to the decision made by the examining physician.

At the time the eye report is being considered in connection with eligibility for monthly assistance it will also be considered by the state supervising ophthalmologist as to a potential eye treatment plan. Before the state department approves a case for eye treatment it is discussed with the state supervising ophthalmologist whose recommendation as to whether or not the department should enter into the treatment plan is followed. If, for instance, the examining physician states that the individual has a condition which is responsive to surgery but the state supervising ophthalmologist, because of other factors present, does not agree with the decision of the county examiner, the question "Should the state department consider this case for temporary eye treatment?" will be answered "No." It is important that the county department determine the decision of the state supervising ophthalmologist before any recommendations for assistance are made.

Section 66 of the Welfare Act provides that no assistance shall be granted or continued to any blind person who refuses medical, surgical or other treatment where his eyesight may be partially or wholly restored by such treatment. It is the policy of the state department to apply this provision of The Act in those cases where an individual is young, employable and has dependents and refuses to accept an approved eye treatment plan. A rejection should be submitted to an application in which such a situation prevails. A rejection is also in order in instances where the applicant refuses an approved treatment plan for an infectious eye condition which will endanger the eye health of others.

E. Report on Applicant for Blind Assistance After Eye Examination, DPW Form 46

If the copy of SDPW Form 1256 received by the county department indicates that the state supervising ophthalmologist has decided that the applicant is not blind within the meaning of the definition of blind-

ness in The Welfare Act of 1936, the county department shall fill out DPW Form 46, Report on Applicant for Blind Assistance After Eye Examination, and send one copy of this form to the division of public assistance, of the state department, in accordance with regulation 2-205. (See sample of DPW Form 46 at end of this Section.) The duplicate copy of DPW Form 46 shall be filed in the case record in the office of the county department. DPW Form 46 shall not be used where the county department finds a person ineligible because of his refusal to accept eye treatment. In such instances, a rejection of his application should be submitted to the state department, in accordance with the usual procedure. In no case shall a county department notify an applicant for assistance to the blind of the results of the eye examination as this is the responsibility of the state department.

IV. EYE EXAMINATION IN CONNECTION WITH APPLICANTS FOR TEMPORARY EYE TREATMENT

For procedures regarding treatment to prevent blindness or restore eyesight, see Chapter IV, Section 6, Eye Treatment.

Prescribed by State Department
of Public Welfare and State
Board of Accounts

DPW Form 43

THE COUNTY DEPARTMENT OF PUBLIC WELFARE

OF ..... COUNTY

..... INDIANA

..... 19.....
Date

RECOMMENDATION FOR APPOINTMENT OF EYE PHYSICIAN

The County Department of Public Welfare of ..... County, Indiana hereby recommends the appointment of:

Name .....

Address .....

as a person qualified under Section #57 of the Welfare Act of 1936 to give eye examinations to applicants for assistance to the blind.

Data on such person:

License held ..... Date of License .....

School from which diploma or certificate was obtained .....

..... Degree held: .....

Date of diploma or certificate .....

Length of practice in county .....

Age ..... Sex .....

Name and address of two persons who are qualified to judge the professional competency of the above person:

.....

.....

Signed - by order of the County Board

.....
County Director of Public Welfare

Approved by .....
Div. of Public Assistance of State Department

Prepare in triplicate.	
1. Copy State Dept. Public Welfare	O
2. Copy State Dept. Public Welfare	O
3. Copy County Dept. Public Welfare	O

P-93-9-21-37

Prescribed by the State Department
of Public Welfare and the State
Board of Accounts

DPW Form 42

THE COUNTY DEPARTMENT OF PUBLIC WELFARE

OF ..... COUNTY

..... INDIANA

Application - B .....
Code-Serial

.....
Date

REPORT ON APPLICANT FOR BLIND ASSISTANCE

After Submission of Application

An examination of the application of:

Name .....

Address .....

for assistance to the blind indicates that such person is not eligible for assistance to the blind because of the following reason(s) -

.....

.....

.....

Signed - by authority of the County
Board of Public Welfare

.....
County Director of Public Welfare

Prepare in duplicate, both copies to be signed
1. Copy State Dept. of Public Welfare
2. Copy County Dept. Public Welfare

P-96

Prescribed by State Department
of Public Welfare and State
Board of Accounts

DPW Form 44

THE COUNTY DEPARTMENT OF PUBLIC WELFARE

of _____ COUNTY

_____ INDIANA

Application No. B ____ _____
Code Serial

_____
Date

NOTICE TO REPORT TO EYE PHYSICIAN

Name _____

Address _____

Your application for assistance has been received. As the first step in investigation of your case, you are to report to:

_____
(Name of Eye Physician)

_____
(Address)

on _____
(Day of Month)

at _____
(Time of Day)

for an eye examination under the provisions of the Welfare Act of 1936. If you cannot report at this time, please notify the County Welfare Department immediately. Further action on your application cannot be taken until after the eye examination.

Signed - by authority of the County Board of
Public Welfare

_____
County Director of Public Welfare

This order is not to be issued unless application on its face, shows eligibility under the Welfare Act of 1936.

Prepare four copies, all copies must be signed.	
1. Copy to applicant	0
2. Copy to eye physician	0
3. Copy to State Dept. Public Welfare	0
4. Copy to County Dept. Public Welfare	0

Form Prescribed by State Department of Public Welfare and Approved by State Board of Accounts

DPW Form 45
(Revised)
10M—11-1-39

THE COUNTY DEPARTMENT OF PUBLIC WELFARE

of_____County

_____Indiana

PHYSICIAN'S REPORT ON EYE EXAMINATION

Application No. B_____
Code Serial

Applicant's Name_____(Sex)_____(Race)_____

Address_____
(Street and Number) (Municipality) (County) (State)

Date of Birth_____ Age at onset of blindness: Right eye_____Left eye_____

Diagnosis: (If primary eye condition or etiological factor is not the same for both eyes, divide space and indicate each separately.)

Eye condition primarily responsible for blindness_____

_____

Secondary conditions, if any_____

_____

Etiological factor responsible for primary eye condition_____

If history of eye injury state type and date_____

Describe the appearance of eyes, including fundi_____

_____

_____

_____

_____

_____

Central Visual Acuity **Use Snellen notations**	**Without Glasses** Distance (20 ft.)	Near (14in.)	**With Glasses** Distance (20 ft.)	Near (14 in.)
20/155, 20/200, 10/200 14/141, 14/224, 7/224 etc. Use AMA reading card for recording near vision. Right eye				
Left eye				

Peripheral vision: (To be recorded where accepted as a factor in blindness on persons whose central vision is so good as to render them ineligible for aid to the blind in the state and who by rough test show a marked field defect.)

To be done on a standard perimeter with a radius of 13 inches and a white test object 3 mm in diameter. The test object should be of such size that it subtends an angle of approximately one degree.

Is there any limitation in the field of vision? What is the widest diameter in degrees of remaining visual field?

Right eye_____ Left eye_____

Right eye_____ Left eye_____

Prepare in quadruplicate. Sign all copies.
1 copy to eye physician ☐
3 copies to County Dept. Public Welfare which will forward two to State Dept. ☐

Prognosis: (Is there any likelihood that operation or treatment might partially or wholly restore eyesight or prevent blindness?)

_____

Recommendations—Primary Eye Condition _____

_____

_____

Recommendations—Etiological Condition _____

Remarks (About when should applicant be re-examined? etc.) _____

_____

_____

_____

_____

_____

Where cataract is cause of blindness state projection and separation of lights for affected eye or eyes _____

_____

_____

_____

Date of Examination _____ _____
(Signature of eye physician)

Date of Report _____ _____
(Address)

Do not write below this line

From the evidence submitted the applicant is/is not blind within the meaning of the definition.	From the evidence submitted the applicant probably will/will not be benefited by treatment.
Date State Supervising Ophthalmologist	Date State Supervising Ophthalmologist

Prescribed by State Department
of Public Welfare and State
Board of Accounts

DPW Form 46

THE COUNTY DEPARTMENT OF PUBLIC WELFARE

of _____ COUNTY

_____ INDIANA

Application No. B___-_____
Code Serial

_____, 19___
Date

REPORT ON APPLICANT FOR BLIND ASSISTANCE

AFTER EYE EXAMINATION

The report of the eye physician who made the examination of:

Name _____

Address _____

_____

indicates that such person does not have the degree of blindness as defined in Section 1, subsection o, of The Welfare Act of 1936.

Signed- By authority of the County Board
of Public Welfare

_____
County Director of Public Welfare

Prepare in duplicate, both copies to be signed
1. Copy State Dept. of Public Welfare accompanied by State Dept's. copy of DPW Form 45, "Report of Eye Physician" ○
2. Copy to County Department of Public Welfare ○

SDPW Form 1256

DECISION OF STATE SUPERVISING OPHTHALMOLOGIST ON BLIND ASSISTANCE CASE

_____ County

Application Number B ____ _____
Code Serial

Name _____

Address _____

1. Is Applicant Blind Within Meaning of Definition: Yes _____ No _____

   Date of Decision of State Supervising Ophthalmologist _____

2. Should the state department consider this case for temporary eye treatment? Yes _____ No _____

   Date of Decision of State Supervising Ophthalmologist _____

Blind Assistance Section

By _____

Date _____

P-2561-7-22-38

SECTION 2

INTERVIEWING

I. WITH THE APPLICANT

When the visitor to whom the case is assigned did not assist the applicant in making out his application during the office interview, he must consider carefully the fact that his initial contact with the applicant will probably determine the nature of their future relationship and the degree of their mutual understanding. This necessitates preparation for the interview and a consideration of the facts already assembled.

A. PLACE OF INTERVIEW

The place of the first interview should be determined on the basis of where the applicant will be most at ease. Usually this will be in his own home, but if the application interview indicates a situation there which is likely to become a disturbing factor, it may be advisable to make an appointment for the applicant to come to the office.

Whether the place of the interview is the home or the office, privacy is advisable. In the office this may not often present a problem, but in the home the visitor may frequently be faced with the difficulty of conducting an interview in the presence of small children or other relatives. The visitor's conduct at this point will be partially determined by the attitude of the applicant. Frequently, the applicant may not have sufficient control of the situation to arrange for privacy, but would welcome the suggestion from the visitor. When the lack of privacy is not a disturbing element to the applicant, it may still seem advisable to the visitor to arrange for an interview at another time and under different circumstances.

B. POINTS TO BE OBSERVED BY INTERVIEWER

Other points to be observed from the intake interview include information already discussed, and the applicant's reaction to any particular subject. The visitor needs to be aware of these facts so he may avoid the irritating and useless procedure of asking for information which the applicant has already given. On occasion it may be necessary to have such information amplified, but if the applicant realizes the necessity for such repetition, he will approach the discussion of it in a more receptive manner. Some reflection on the matter of the applicant's previous reactions will enable the visitor to be more tactful in his approach.

Inconsistencies may be noted in the intake interview or may appear during the first interview in the light of the visitor's previous knowledge

of the recorded material. It is desirable, of course, that the visitor clarify the statements made, but the method of approach to such a situation should in no way imply doubt of the applicant's integrity. It can probably best be handled on the basis of an error which the applicant will be as desirous of correcting as the interviewer. Similar situations may occur when records of other agencies which have had contact with the applicant are read.

C. OTHER AGENCY RECORDS

The type of agency to which the applicant has been known will probably determine whether or not the visitor will want to review these records prior to the first interview. The visitor who is aware of community resources, as represented by various agencies, will know the kind of service offered and the type of records kept and can determine on this basis whether or not some knowledge regarding this service would be helpful prior to a contact with the applicant. Frequently, if records are not read prior to the initial interview, information will be found later, which necessitates additional contacts that might have been avoided. On the other hand, the visitor needs to guard against the possibility of being influenced or prejudiced by the attitudes of other agencies toward the applicant. There is, of course, more danger of this, if such records are read before the visitor is acquainted with the applicant.

More satisfactory results are usually obtained when the visitor determines the objectives of his interview in advance, keeping in mind that these must be sufficiently flexible to be adapted to any trend which the interview may follow at the instigation of the applicant.

D. RELATIONSHIP OF APPLICANT AND VISITOR DURING INTERVIEW

The relationship of applicant and visitor requires the observation of the same social conventions, as those used by the visitor in a non-professional capacity. In calling upon an applicant with whom there has been no previous acquaintance, the visitor should introduce both himself and the agency he represents. Particular care needs to be taken in regard to the manner of greeting because the impression received by the applicant at this moment may set the tone of the whole interview and subsequent contacts.

1. Some Techniques of Interviewing

The visitor needs to be conscious of the fact that the pressure of his job may tend to make his approach to the actual content of the interview too abrupt and hurried. Again he must remember that the applicant may feel very insecure during the investigation period,

and for this reason it is advisable to let him assume the leadership in the interview, if he can. When the visitor has determined that the applicant is in a receptive mental attitude toward the content and purpose of the interview, he may begin to exercise some control in regard to the trend of the conversation, but until that point is reached he should devote his efforts toward the establishment of a sympathetic atmosphere which is essential for a successful interview. Some of the techniques which are helpful in this process include a definite indication of interest in whatever the applicant may be saying, and an attitude which denotes that the visitor has time to listen. The applicant must be at ease and this is not usually possible if the visitor's method of approach implies that his relationship to the applicant is in an authoritative or official capacity. In the accomplishment of this the visitor will find it helpful to eliminate the use of technical terms from his conversation and to speak in a manner easily understood by the applicant.

a. Sensitivity During Interview

After the visitor has determined that the relationship between himself and the applicant is conducive to a good interview, he must not conclude that this is necessarily a static condition. He needs to develop a sensitivity to changes of mood in the applicant, and an ability to review rapidly the preceding discussion in an attempt to analyze the reason for the withdrawal of the applicant from participation in the interview. He may find that his approach has been too rapid and that from the applicant's point of view the contact has 'evolved' into a series of questions and answers which do not give the applicant sufficient opportunity to present his own opinions, as he had been able to do in the first stages of the interview. This is an indication that the visitor needs to revert to a more leisurely manner. The visitor may find that he has been tactless in his method of presenting a question. Much thought needs to be given to the phrasing of questions, so that they will cause no resentment, and so that the answer which may be anticipated is not implied in the question itself.

b. Control of Interview

The visitor necessarily needs to exercise some control of the interview, but this should not be accomplished by interrupting the applicant abruptly when he digresses too far from the material in which the visitor is interested. Such procedure will probably cause resentment, and the aim of turning the interview toward more pertinent information can be more tactfully attained by calling the applicant's attention back to some previous re-

mark which is related to the essential facts which the visitor desires to learn, and encouraging him to go ahead from that point.

c. Explanation of Verifications

If the applicant is not aware of the necessity for making verifications before his eligibility can be determined, the visitor should indicate to him the contacts which he expects to make in this connection and the necessity for taking this action. It may be possible for the applicant to make suggestions about procedures which will cause less embarrassment for him. During the interview the visitor needs to be thinking in terms of possible leads for sources of verification or other needed information and to secure sufficient facts to enable him to make use of these.

2. Conclusion of Interview

The interview should be concluded whenever there is any indication that the process is putting too much strain upon the applicant, even though this may necessitate another visit. The good will of the applicant and the greater degree of accuracy of the information received, which will probably result, will compensate for the delay in time. Usually the applicant will want to know what the visitor contemplates as his next step in the investigation procedure and he should be told; but in this connection the visitor should be particularly careful to avoid making promises unless he is certain they can be fulfilled. When the visitor leaves there should be no uncertainty in the mind of the applicant in regard to the next steps which will be taken in the completion of the investigation.

II. WITH OTHER PERSONS

In the completion of the investigation the visitor is likely to interview relatives more frequently than any persons other than the applicant himself. He will necessarily have obtained some information from the applicant concerning the relative's degree of interest in him, his present position in the community, and some facts concerning his background. It will prove extremely difficult for the visitor to remain objective in the situation with these points in mind, and with perhaps, some strongly rooted feeling in regard to the degree of responsibility to be assumed by relatives. It is essential, however, that the visitor approach the interview, if possible, with no previously conceived plans for the relative in mind, because the relative will probably sense rather quickly that he is being told what he should do and resentment of the visitor and department, and perhaps even the applicant will result. The more successful approach is usually to find out from the relative what he knows of the applicant's situation and what he has to offer as a plan.

The visitor is obliged to acquaint the relative with his degree of responsibility as set forth in the laws and regulations, but if willingness to assist is signified earlier in the interview, or if the visitor determines that the relative is financially unable to aid the applicant, it may be unnecessary to stress this point. The visitor should always keep in mind that stressing the legal or moral responsibility of the relative is a poor method of beginning the interview, because it places the relative in a defensive position, which does not usually result in a cooperative attitude.

Other persons whom the visitor will frequently need to see in the interests of the applicant include employers, doctors, public officials, and representatives of other social agencies. In these contacts the visitor also needs to guard against presenting his own plans for the applicant too prominently, rather than asking for suggestions from the person interviewed. If the visitor is in need of specific information from the person interviewed, he should indicate clearly the use which he expects to make of these facts, and how they assist in completing the investigation. When information is requested of the visitor in regard to the program, he should consider the question as an opportunity to correct misunderstandings, and to explain any part of the plan in which the person being interviewed shows interest. All information given by the applicant to the visitor is confidential, and this confidence should be respected in discussing the applicant's situation with other persons.

SECTION 3

FACE SHEET DPW FORM 4 (REVISED)

I. GENERAL COMMENTS

The Face Sheet DPW Form 4 (Revised) contains identifying data to be used as the first sheet of the case history in blind assistance cases. The Face Sheet will be used for all such cases and will be inserted in the case folder along with the narrative record, copies of correspondence and all forms pertaining to the case.

The Face Sheet not only gives information about the individual applicant for blind assistance but also his relationship to other members of his family. It provides information concerning other family members and relatives and their whereabouts. The information on the Fast Sheet should be kept up-to-date and as it changes, alterations should be made. In this manner a current record is kept of the applicant and his family.

II. INSTRUCTIONS FOR FILLING OUT FACE SHEET, DPW FORM 4 (REVISED)

County Department of Public Welfare of _____County.
Enter name of county in which application was made.

Application Number

Enter the same number as that assigned to the application.

Surname, First and Middle Names of Applicant

Enter surname under which the case is carried in the files of the county department and give full first and middle names.

Alias or Other Spelling

Enter other names by which applicant may be known or other spelling of his name used by him.

Maiden Name, if Applicable

Enter maiden name if applicant is of the female sex and is, or has been married.

Birth Date--Month, Day, Year

Enter day, month and year of birth of applicant.

Birth Place--City, State, Country

If born in the U. S. indicate city and state in which applicant was born. If not born in the U. S., indicate the country in which applicant was born.

Sex

Use abbreviation M for male and F for female.

Race

Use W for white and N for negro. If other than white or negro use full name to designate race.

Application Date

Enter the date applicant first applied for assistance to the county department.

Reapplication Dates

These spaces will not be used at the time of the first application. When the case is closed and then reopened the new application date is to be noted in one of these spaces.

Marital Status

M for married (if living with spouse or if spouse is temporarily absent from home).

Wid. for widowed or widower.

Div. for divorced, (court has entered a decree of divorce).

Sep. for separated, (not necessarily legal. The decision should be based upon intention of both persons to live apart permanently.)

Des. for deserted.

S. for single, (person has never been married.)

Civil Status

Enter citizen if the individual was born in the United States and has not lost his citizenship through marriage or renunciation, or if he has become a naturalized citizen, or if he has become a citizen through the naturalization of a parent while he was still a minor, or if in the case of a woman, citizenship was acquired by marriage to a citizen. Enter

alien if the individual was not born in the United States and has not subsequently acquired citizenship either by naturalization, or by the naturalization of a parent while the person was still a minor, or by marriage to an American citizen prior to September 22, 1922. Alien should also be entered if the person has been a citizen of the United States and has lost his citizenship by marriage or renunciation.

Religion

Designate "Protestant", "Catholic", etc.

Chronic Disability

Indicate any physical condition which is probably of a permanent nature.

Current Addresses

Give number and street or R.F.D. number, and city or town where applicant is residing at the time application is made. When applicant moves, new addresses are to be recorded in the same manner on the succeeding lines.

Date (From-To)

Date applicant moved to the preceding address is to be noted in the space under From. When applicant moves from this address, the dates will be noted under To.

Monthly Rent or Payment

Enter amount due each month.

Name and Address of Landlord

Enter name of person to whom rent or payment is made, (not necessarily the owner).

Addresses for Past Nine Years

Enter the most recent, first. Give number of street, or R.F.D. number, city or town, and county and state. Give dates of time lived at each address.

Members of Household, Excepting Applicant

Include all persons sharing the household facilities with the applicant, with the exception of other persons in a boarding or rooming house.

Name

Include first and last name.

Relationship to Applicant

State relationship or if not related, state "none".

Date of Birth (Fill in only for spouse, sons, and daughters of applicant).

Give day, month, and year of birth.

Place of Birth (Fill in only for spouse, sons and daughters).

If born in United States indicate city and state in which born. If not born in the United States, indicate country in which born.

Usual Occupation

Give name of occupation or vocation followed when employable and which has been followed for longest period of time and for which person may have been trained.

Chronic Disability

Indicate any physical condition which is probably of a permanent nature.

Cross Reference

Give case number, if person is known to the county department.

Legally Responsible or Interested Relatives Living Outside the Household

List all children living outside the home and any other legally responsible relatives. Also include here names of relatives who are interested or have assumed responsibility for applicant.

Relationship to Applicant

Give relationship.

Date of Birth (Fill in only for spouse, sons and daughters).

Give day, month and year of birth.

Place of Birth (Fill in only for spouse, sons and daughters).

If born in United States indicate city and state in which born.
If not born in the United States, indicate country in which born.

Address

Give street or R.F.D. address, city or town, and state where relative was last known to have lived.

Cross Reference

Give case number, if person is known to the county department.

Names of Spouses, Including Present

Include both first name and surname.

Marriage

Date--Day, month and year.
Place--City or town, and state where license was obtained.

Death or Divorce

Indicate how the marriage was terminated by inserting the word death or divorce.

Date

Day, month and year of death or divorce.

Place

Location where death or divorce would be recorded.

Birthplace of Husbands, if not in Household

United States or foreign territory. If the latter, specify the country.

Date and Place of Naturalization of Applicant, Foreign Born Husband, or Foreign Born Parent, Whichever Applicable.

Name

Surname, first and middle names of the naturalized person.

First Papers

Day, month, and year issued.

Final Papers

Day, month and year issued.

Place

Location where completion of requirements for citizenship would be recorded.

Date Blindness Occurred

Enter month and year applicant lost his eyesight. If the loss of eyesight was gradual this may be difficult to do but specify the time as closely as possible.

Place Blindness Occurred

Enter number, street, city and state, where the applicant was residing at the time he lost his eyesight.

Name and Address of Attending Physician

Full name and mailing address of physician who was in attendance at the time blindness occurred.

Insurance on Applicant

Company

Name of company, also address of home office.

Number

Enter number of insurance policy, usually found on the first page of the policy.

Plan

Enter whether policy is on whole or straight life, 20 payment life, 20 year endowment basis, etc.

Date of Issue

Enter day, month and year policy was issued.

Amount

List and identify cash surrender value and face value of policy.

Premium

State amount of premium and whether paid weekly, monthly, quarterly semi-annually, or annually.

By Whom Paid

If premium is paid by someone other than the applicant, enter the name. If paid by applicant, enter "applicant".

Date Premium Last Paid

Enter day, month and year; obtain this date from premium receipt on ordinary contracts and from premium receipt book on industrial contracts.

Date and Amount of Loans

Enter the date and amount from loan statements in possession of the holder on ordinary contracts and from lien statements on industrial policies which are stamped on the policy itself. The date of loan is important.

Real Estate Which Applicant Owns or is Purchasing on a Contract Basis, Including Any Which He Holds Jointly with Others

Address

State specifically as to number, street, city and state.

In Whose Name is Property

Indicate holder or holders of legal title. Where property is being purchased on a contract basis, list as title holder the person or firm selling the property to applicant.

Assessed Value

Value of property as stated on tax bill or as procured from county treasurer or assessor. This is the value set on the property by the assessor for taxation purposes.

Value of Applicant's Interest

Estimate of monetary value of applicant's proportional interest in the property. If four persons hold title and gross assessed valuation is $2400.00, then applicant's interest in it is one-fourth, or $600.00

Balance due on Mortgage or Contract

Principal balance due on mortgage or contract.

Balance due on Interest

If on a mortgage, give the total amount of current interest plus delinquent interest. If on a contract or on a building and loan obligation, where monthly payments are involved, give the amount payments are in arrears.

Present Income from Property

Total of any rentals or other income from the property on a monthly basis.

Annual Taxes

Enter amount of yearly taxes, either the last or current year, whichever is available. Do not include delinquent taxes.

Building and Loan Payments

Give the amount of payment due each month to the building and loan association or to the seller if the purchase is being made on a contract basis. Do not include delinquent payments.

Personal Property, Including Any Jointly Owned.
(Designate joint ownership by letter "j" after name and kind).

Kind and Name

Describe accurately.

Value of Applicant's Interest

Approximation of value of personal property.

Bank Accounts, Building and Loans, and Savings
(Indicate joint deposit by letter "j" after "Amount on Deposit").

Name of Bank, Post Office or Building and Loan Association

Address

State specifically as to number, street, city and state, if in another state.

Amount on Deposit

Indicate present balance. If bank or loan association is closed or permits only limited withdrawals, state amount available. ($200 or $20 per month).

In Whose Name is Account

Enter applicant or other name if not in name of applicant.

Real and Personal Property of Substantial Value, Assigned, Transferred, or Sold Within Past Five Years.

Description

On real estate give location of property, number, street and city. On personal property give accurate description and amount. (4 shares U. S. Steel Common @ $50 a share).

To Whom Disposed

Give name and address of person or firm to whom the property was assigned or transferred. If person to whom disposed is related to applicant, state relationship.

Date

Enter date of transaction, giving day, month, and year.

Conditions of Disposal

State price or consideration of sale or transfer. Indicate, if possible, applicant's motive for disposing of property.

Social Service Exchange Registrations or Names of Interested Agencies

Person Known

Indicate the name of the person mentioned under Members of Household.

Legally Responsible or Interested Relatives or the applicant who is known to the agency.

Name and Address of Agency

Give full name, not abbreviations, give street address, also city and state if not local. Social Security numbers should also be included here.

Dates Known

If known to agency on more than one occasion, list all dates when known.

CRIBED BY STATE DEPARTMENT OF PUBLIC WELFARE
APPROVED BY STATE BOARD OF ACCOUNTS

DPW FORM 4
(REVISED)
50M-11-1-39

FACE SHEET

NTY DEPARTMENT OF PUBLIC WELFARE OF _____ COUNTY

APPLICATION NUMBER ____ ____ ____
TYPE CODE SERIAL

SURNAME	FIRST	MIDDLE	ALIAS, OR OTHER SPELLING	APPLICATION DATE

EN NAME, PLICABLE	BIRTH DATE MONTH-DAY-YEAR	BIRTHPLACE CITY, STATE, COUNTRY	SEX	RACE	REAPPLICATION DATE

TAL STATUS	CIVIL STATUS	RELIGION	CHRONIC DISABILITY	REAPPLICATION DATE

CURRENT ADDRESSES	DATE FROM	DATE TO	MONTHLY RENT OR PAYMENT	NAME AND ADDRESS OF LANDLORD

RESSES FOR PAST NINE YEARS

STREET, CITY, COUNTY AND STATE	FROM	TO	STREET, CITY, COUNTY AND STATE	FROM	TO

IBERS OF THE HOUSEHOLD, EXCEPTING APPLICANT

NAME	REL. TO APPL.	DATE OF BIRTH	PLACE OF BIRTH	USUAL OCCUPATION	CHRONIC DISABILITY	CROSS REFERENCE

ALLY RESPONSIBLE OR INTERESTED RELATIVES LIVING OUTSIDE THE HOUSEHOLD

NAME	REL. TO APPL.	DATE OF BIRTH	PLACE OF BIRTH	ADDRESS	CROSS REFERENCE

NAMES OF SPOUSES, INCLUDING PRESENT	MARRIAGE		DEATH OR DIVORCE	DATE	PLACE	BIRTHPLACE OF HUSBANDS (IF NOT IN HOUSEHOLD)
	DATE	PLACE				

NATURALIZATION OF APPLICANT, FOREIGN BORN HUSBAND OR FOREIGN BORN PARENT, WHEN APPLICABLE

NAME	FIRST PAPERS	FINAL PAPERS	PLACE

DATE BLINDNESS OCCURRED	PLACE BLINDNESS OCCURRED	NAME AND ADDRESS OF ATTENDING PHYSICIAN

INSURANCE ON APPLICANT (INCLUDE ANY ON PAID UP OR EXTENDED BASIS)

COMPANY	NUMBER	PLAN	DATE OF ISSUE	AMOUNT	PREMIUM	BY WHOM PAID	DATE PREMIUM LAST PAID	LOANS
								DATE

REAL ESTATE WHICH APPLICANT OWNS OR IS PURCHASING ON A CONTRACT BASIS (INCLUDING ANY JOINTLY OWNED).

ADDRESS	IN WHOSE NAME IS PROPERTY	ASSESSED VALUE	VALUE OF APPLICANT'S INTEREST	BALANCE DUE		PRESENT MONTHLY INCOME FROM PROPERTY	ANNUAL TAXES	MONTHLY BLDG AND LOAN PAYMENTS
				ON MORTGAGE OR CONTRACT	INTEREST			

PERSONAL PROPERTY (INCLUDING ANY JOINTLY OWNED)

KIND AND NAME	VALUE OF APPLICANT'S INTEREST	KIND AND NAME	VALUE OF APPLICANT'S INTEREST

BANK ACCOUNT, BUILDING AND LOANS, AND SAVINGS (INCLUDING ANY JOINTLY OWNED)

NAME OF BANK, POST OFFICE, OR BUILDING AND LOAN ASSOCIATION	ADDRESS	AMOUNT ON DEPOSIT	IN WHOSE NAME IS ACCOUNT

REAL AND PERSONAL PROPERTY OF SUBSTANTIAL VALUE, ASSIGNED, TRANSFERRED OR SOLD WITHIN PAST 5 YEARS.

DESCRIPTION	TO WHOM DISPOSED	DATE	CONDITIONS OF DISPOSAL

SOCIAL SERVICE EXCHANGE REGISTRATIONS OR NAMES OF INTERESTED AGENCIES

NAME OF PERSON KNOWN	NAME AND ADDRESS OF AGENCY	DATES KNOWN

SECTION 4

VERIFICATIONS

I. GENERAL STATEMENT

The first part of this section explains the sources and methods to be used in verifying the eligibility requirements for blind assistance.

The second part explains the method for filling out the Statement of Verifications, DPW Form 5, (Revised).

II. SOURCES AND METHODS USED IN MAKING VERIFICATIONS

A. AGE

1. Purpose

The purpose of the verification of age is to determine whether or not the applicant is twenty-one years of age or over, if a male, or eighteen years of age or over, if a female, in accordance with Section 52(a) of The Welfare Act of 1936, as amended.

The Indiana law is specific in requiring that a male must be twenty-one years of age or a female eighteen years of age to qualify for assistance to the blind. Verification of age shall be made in all cases of applicants under thirty years of age. More care in verification of age is required when a male applicant is near twenty-one years and a female near eighteen years of age.

2. Sources

The following sources have been divided into two groups: Primary and Secondary. The primary sources are generally considered more reliable and when possible should be inquired into before resorting to the use of secondary sources. Because of the preferential nature of primary sources, age may be considered as adequately verified when one of these sources has been used. If it is necessary to utilize secondary sources, however, at least two shall be used in each instance where they are obtainable. Whenever there is a conflict as to eligibility or non-eligibility according to the secondary sources used, diligent search should be made of all sources available and care should be exercised in evaluating the conflicting material. Usually those records which of necessity were made by the individual himself, such as marriage records, or birth records of children may be considered as more reliable than records which may have been made from information given by a person other than the individual himself.

The adequacy of these sources may vary from county to county, depending upon the completeness of the various county records, so that it is conceivable that in some particular situation it may be necessary to reconsider the relative values of the sources available.

a. Primary

Birth record of applicant. (The record must be based on information filed at the time of birth or shortly thereafter and must be accompanied by identifying data if the child is not named or if a different name is shown.)

Parish records - baptismal certificates. (If made shortly after birth.)

b. Secondary

School records

National Census Records

The records listed below should be used only if they were made at least five years prior to application.

Insurance policies on applicant. Where a re-rate has been made on age (that is, where an older age is used on the policies due to the applicant's health condition) this source should not be used.

Federal or state records in the case of those who have been in civil or military service of nation or states.

Employment records

Passports

Naturalization papers

Records of trade unions, fraternal societies, or other organizations.

Hospital records, or those of physicians

Vaccination certificates

Marriage certificates having date of marraige, birth place, and the ages of the contracting parties.

Local census records, if they give birth date and place of birth.

Savings bank records. (Depositors are sometimes required to give age at time of opening accounts.)

Personal assessment records. (Assessor's office.)

Old licenses of various kinds, such as hunting and fishing licenses if the age of the licensee is given.

Driver's license records. The information may be obtained by submitting full name and address given at time of issuance of license. Request is to be addressed to the Automobile License Bureau, State House.

Records of town, city, or county public welfare officials and of private welfare organizations in the cases of persons who have been aided by either, if the records give date of birth.

Newspaper clippings properly identified as to date.

Permanent voting registration records in the office of the clerk of courts. (To be used only if other sources are not available.)

Affidavits

Affidavit for Verification of Age Acceptable in Certain Cases

There will be no objection to the use of an affidavit in the verification of age in those cases in which the county department has not been able to find other acceptable sources. An affidavit may not be used as proof of age when available records indicate that the applicant is younger than the required age.

Acceptable sources are those listed in the Blind Assistance Manual, or those that the division of public assistance of the state department has specifically approved.

Use of Age Affidavit, DPW Form 58

An affidavit for the verification of age is to be used only with the consent in each case of the director or case work supervisor of the county department of public welfare responsible for making the recommendation on the case.

The affidavit shall be submitted on DPW Form 58, Age Affidavit.

Before an affidavit is acceptable as a source of age verification, it shall be presented to the director or case work supervisor of the county department of public welfare for

his approval and signature. Before the visitor presents the affidavit form to the director or supervisor for review, the sources tried for verification, listed on the reverse side of the form, shall be carefully checked as evidence that every effort has been made to verify age, before resorting to the use of an affidavit, and the visitor responsible shall sign and date the form in the space provided. The director or case work supervisor shall give approval to the use of the affidavit by affixing his or her signature in the space "Use approved by _____."

Person Making Affidavit

The affidavit should be accepted only from persons considered reliable and trustworthy in the community and who have definite knowledge concerning the age of the applicant. Generally speaking, affidavits should not be accepted from relatives, unless no other responsible person is in a position to furnish the required information.

An allegation in the Affidavit that the Deponent Knows the Applicant to be Twenty-one Years of Age or Over, if a Male, and Eighteen Years of Age or Over, if a Female, Will Not Be Sufficient.

If the affidavit is to be accepted, the person making it must be able to cite some specific reason or reasons why he knows the applicant is over the required age. In many instances individuals will be willing to take oath that an applicant is of a certain age simply because they have known him for a number of years and believe him to be. Extreme care should be exercised that such affidavits are not utilized for verification. It is desirable that the deponent recount some experience or occurrence, which would offer conclusive evidence of the applicant's age.

Oath on the Affidavit

As indicated on the affidavit form, the oath may be administered by a notary public or public official authorized to take oaths, or it may be administered by an employee of the state or county department of public welfare, who has been authorized to take oaths without charge.

More than one Affidavit.

In some cases it will be necessary to obtain more than one affidavit, especially when the applicant's age does not exceed the eligible age by a reasonable margin.

Affidavit from other Counties

In some instances it will be necessary to secure affidavits from persons in other counties. They may be secured by writing to the county department of public welfare of the counties concerned in such instances. The oaths may be administered by employees of the other county department of public welfare,

Affidavits Taken in Another State

In some instances it will be necessary to secure affidavits from persons in other states. In such cases county departments should direct requests for this service to the other state through the Inter-State Correspondence Section of the State Department.

(See Age Affidavit, DPW Form 58, at end of Chapter II, Section 4.)

If a visitor is unable to verify the age of an applicant under 30 years from any of the above sources, the county department should refer the matter to the state department.

B. CITIZENSHIP

1. Purpose

The purpose of verification of citizenship is to determine whether or not the applicant is a citizen of the United States.

2. Sources

Birth certificate or other evidence of birth place unless citizenship has been lost since birth.

Naturalization papers.

Records of court which granted citizenship.

3. Comments

Only in case of applicants not born in the United States should there be

much difficulty in checking citizenship. For foreign born applicants, documentary proof must be obtained to verify United States citizenship. A person may be a citizen of the United States by birth, marriage or naturalization:

Generally speaking, any person born in the United States or born of American citizens is a citizen unless such citizenship was lost by marriage or renunciation.

The American born woman marrying an alien between March 2, 1907 and September 22, 1922, lost her American citizenship by her marriage. She is, therefore, an alien as long as she continues to reside with her alien husband. If, however, her husband dies or she is legally divorced from him, she does not automatically become an American citizen but must apply for repatriation; except that if the marriage was terminated prior to September 22, 1922, and the woman continued to live in the United States, she regained her citizenship automatically. Upon filing of an application for repatriation, the naturalization and immigration officials ask for the petition of evidence as to her birth, as to her marriage, and as to the verification of the death of her husband, or her divorce from him. This evidence is then submitted to the court to make the final determination as to her citizenship.

In case the husband of the woman is still living, however, and she is merely separated from him or deserted by him, she may not apply for repatriation. It is necessary in instances of this sort for her to file a petition for naturalization. The necessity of filing first papers, however, is done away with and the time element considerably shortened.

If, however, she was native born and married an alien prior to March 2, 1907 (and did not live outside of the United States with him) or after September 22, 1922, or if the marriage has been terminated and she continues to reside in the United States, she is an American citizen, unless she renounces her citizenship.

If a foreign born woman who might herself be naturalized married an American citizen prior to September 22, 1922, she automatically became a citizen of the United States. Upon termination of the marriage after March 2, 1907 she was assumed to retain American citizenship if she continued to reside in this country and did not renounce her citizenship.

A foreign born woman marrying an American citizen after September 22, 1922, is not compelled to file first papers, but needs only to get her second papers.

Birthplace need not be specifically and separately verified unless there is some doubt regarding citizenship. In all instances where the applicant is a naturalized citizen, the naturalization papers should be examined, or if not available, the record verified through the court in which the papers were issued or through the records of the United States Department of Labor. Naturalization and citizenship

are explained in "Naturalization, Citizenship, and Expatriation Laws--Naturalization Regulations" which can be obtained for twenty cents from the Superintendent of Documents, Washington, D. C.

C. RESIDENCE

1. Purpose

The purpose of verification of residence is to determine whether or not the applicant meets the state residence requirements as set forth in Section 52 of The Welfare Act of 1936.

2. Sources

The following sources have been divided into two groups: Primary and Secondary. The primary sources are generally considered more reliable and when possible should be inquired into before resorting to the use of secondary sources. Because of the preferential nature of primary sources, residence may be considered as adequately verified when one of these sources has been used. If it is necessary to utilize secondary sources, however, at least two shall be used in each instance where they are obtainable. Whenever there is a conflict as to eligibility or non-eligibility according to the secondary sources used, diligent search should be made of all sources available and care should be exercised in evaluating the conflicting material. Usually those records which of necessity were made by the individual himself, may be considered as more reliable than records which may have been made from information given by a person other than the individual himself.

The adequacy of these sources may vary from county to county, depending upon the completeness of the various county records, so that it is conceivable that in some particular situation it may be necessary to reconsider the relative values of the sources available.

a. Primary

Landlords' records (a statement of the landlord is not acceptable as verification but records which he may have are acceptable).

Rent receipts

Employment records

Relief agency records

Merchants records

Utility records

Post Office records

Route book of rural route postman

Newspaper records

b. Secondary

City directory

County directory

Fraternal Society Records

Trade Union Records

Permanent Registration Records

Personal Assessment Records

Automobile License Records

Medical Records

Postmarked envelopes or old letters

Church records

Affidavit

Affidavit for Verification of Residence Acceptable in Certain Cases

There will be no objection to the use of an affidavit in the verification of residence in those cases in which the county department has not been able to find other acceptable sources. An affidavit may not be used as proof of residence when available records disprove residence.

Acceptable sources for the verification of residence are those listed in the Blind Assistance Manual, or those that the division of public assistance of the state department has specifically approved.

Use of Residence Affidavit, DPW Form 59

An affidavit for the verification of residence is to be used only with the consent in each case of the director or case work supervisor of the county department of public welfare responsible for making the recommendation on the case.

The affidavit shall be submitted on DPW Form 59, Residence Affidavit.

Before an affidavit is acceptable as a source of residence verification, it shall be presented to the director or case work supervisor of the county department of public welfare for his approval and signature. Before the visitor presents the affidavit form to the director or case work supervisor for review, the sources tried for verification, listed on the reverse side of the form, shall be carefully checked as evidence that every effort has been made to verify residence before resorting to the use of an affidavit, and the visitor responsible shall sign and date the form in the space provided. The director or case work supervisor shall give approval to the use of the affidavit by affixing his or her signature in the space "Use approved by _____."

The affidavit shall be accepted only from persons considered reliable and trustworthy in the community and who have definite knowledge that the applicant resided at a certain location for a specified time. The manner in which the person making the affidavit became possessed of the knowledge that applicant resided at a certain location, should be indicated. Generally speaking, affidavits should not be accepted from relatives, unless no other responsible person is in a position to furnish the required information.

As indicated on the affidavit form, the oath may be administered by a notary public or public official authorized to take oaths, or it may be administered by an employee of the state or county department of public welfare, who has been authorized to take oaths without charge.

In some cases it will be necessary to obtain more than one affidavit, especially where a person has lived at two or more places within the five year qualifying period.

In some instances, it will be necessary to secure affidavits from persons in other counties. They may be secured by writing to the county departments of public welfare of the counties concerned in such instances. The oaths may be administered by employees of the other county department of public welfare. (See sample affidavit from reliable person verifying residence at end of Chapter II, Section 4.)

3. Comments

There are two residence requirements under which an applicant may qualify:

a. An applicant who has lived in the state for a period of five out of the last nine years immediately preceding the date of the filing of his application, the last year of which shall be continuous and immediately preceding the date of his application, meets the state residence requirements regardless of when and where he lost his eyesight.

b. If an applicant does not meet the residence requirements listed under "a", but lost his eyesight while a resident of this state, he meets the residence requirements. (See Section 52, Subsection (b) of The Welfare Act of 1936.) If, in any case a county department is not certain in the interpretation of requirement (b), advice of the state department should be obtained.

Many people will have difficulty remembering former addresses and dates of removal from former addresses. The aid of children and other relatives may be necessary in securing direct and full information. In checking residence, in many cases it will be necessary to write to other counties for verifying material. In cities with annual directories such source is very valuable. Often the public libraries will have copies for the past years.

In order to satisfy the residence requirement of having lost eyesight while a resident of the state, two verifications are necessary. First, it must be definitely ascertained that the applicant acquired the degree of blindness specified in The Welfare Act while a resident of the state; and second, his residence in the state at the time he acquired this degree of blindness must be definitely verified. The only authentic sources of verification for having acquired the degree of blindness specified in the Act are medical records, either those of the examining physician himself, or of some health agency caring for the individual at the time eyesight was lost. When vision has been lost through the removal of the eye, this verification should not be difficult. Since, however, loss of vision may in many instances be a progressive matter, verification that the individual had acquired the degree of blindness required in the Act, unless the eye has been removed, will be much more difficult.

In determining whether or not a person was a resident of the state at the time he lost his eyesight, two factors may exist and should be considered in determining if the person had actually acquired residence in this state. First, he must actually have been in the county in which he claims residence as of the day upon which he begins to claim residence, and second, he must have shown at that time an intention of making that county his home. A mere visit to the county or state does not, therefore, give a person residence status in that county or state. For example: A father living in Michigan, who is visiting his son in Indiana, does not acquire residence in Indiana until he shows an intent to make Indiana his home. In a great many instances it will be very difficult to determine whether the presence of a person was in the nature of a visit or in the nature of actually taking up residence. The visitor will have to base his judgment upon the facts of each individual case. Temporary absence from the state does not constitute loss of residence unless the person has declared his intention of taking up his residence elsewhere. Thus, an applicant who has been visiting relatives in another state, remains a resident of Indiana (See Chapter IV, Section 3 for further details concerning temporary absence from the state).

As the last paragraph of Section 52 of The Welfare Act of 1936 indicates, any absence in the service of the State of Indiana or the United States does not interrupt the applicant's period of residence provided a domicile is not acquired outside of the State.

Where special situations arise on questions of residence, it will be well for the county department to seek the advice of the state department.

D. NEED

1. Responsibility of Husband

a. Purpose

It is essential to determine whether or not the husband is able to support, wholly or partially, the applicant and to determine the amount of assistance he is able to provide, before assistance is granted, since a husband has a legal responsibility for the care of a wife. As set out in the Statutes of Indiana (Burns 10-1405, Chapter 73, pp. 1, page 139) every husband is required to support his wife and provide her with necessary food, clothing and medical attention.

b. Sources

(1) Personal interview with husband

(2) Correspondence with other counties

(3) Use of DPW Form 11 (Revised)

c. Comments

The husband should be interviewed in order to learn in what way he has been providing for his wife and how he thinks he can provide for her in the future. This should be done if husband is living either with the wife or by himself or with relatives or friends.

Wages from employment should be verified from the employer to determine the extent of the assistance the husband can give.

Income from property, pensions, compensations, etc., should be verified by the same sources as set out under other sections of this chapter of the manual.

If the husband is not living with the wife making the application, the visitor should make every effort to locate him through

contact with relatives, employers, or other sources and, if possible, he should be contacted.

d. Use of DPW Form 11(Revised)

(See sample form at end of Chapter II, Section 4).

When a county department finds that a relative legally responsible for the support of the applicant lives in another county of the state, the county department shall ascertain the ability of such relatives to support the applicant by writing a letter to the county department of the county in which the relative resides, enclosing a copy of DPW Form 11 (Revised), Data from Responsible Relative, and requesting the county department to contact the relative and have him fill out the DPW Form 11 (Revised) and to secure such other information about his circumstances as may be pertinent. Such information shall be returned to the county department making the inquiry. If a county department is unable to locate such a relative it shall immediately notify the county department from which the request came. All county departments shall give prompt attention to requests of such aid from other counties. This same rule applies to information which the county may desire to secure about other relatives of the applicant. When an applicant has a relative legally responsible for his support living in some other county of the state, no assistance shall be recommended for such applicant until written information is secured about the ability of such relative, if located, to support the applicant in whole or in part.

When a county department finds that a relative legally responsible for support of an applicant lives in another state, the county department shall attempt to ascertain the ability of such relative to support the applicant by mailing to him a copy of DPW Form 11 (Revised), Data from Responsible Relative. Failure of the county department to receive, within a reasonable time, a return of DPW Form 11 (Revised) from a relative residing in another state shall not prevent the applicant from becoming eligible for assistance provided he meets all other qualifications.

The county department is expected to determine by personal interview the responsibility of relatives legally responsible for the support of an applicant when such relatives live in the county where the applicant has applied and to record the results of such interview in the narrative record. DPW Form 11 (Revised), Data from Responsible Relative, may be used in connection with such interviews.

(1) Execution of DPW Form 11 (Revised), Data from Responsible Relative

In any case in which DPW Form 11 (Revised), Data from Responsible Relative, is sent to another county for information the full name and exact address of the responsible relative should be given. If it is impossible to obtain the address of the responsible relative, a notation to this effect should be made on DPW Form 11 (Revised). Insistence on this practice will greatly facilitate the work of getting this information as rapidly as possible. The accompanying letter should request specifically any information desired that is not called for on the form.

2. Responsibility of Children

a. Purpose

There is a statute in the Indiana Burns' 1933, 10-1410 (Acts 1921, Ch. 31, pp. 1, p. 90; 1923, Ch. 15, pp. 1, p.53) which requires that children, if financially able, shall support their parents in the event the parents are unable to support themselves by reason of old age, infirmity or illness. This does not apply to children who did not live with or whose parents failed to support them as minors.

The purpose of an investigation of the children of an applicant is to determine whether or not each child is able to assist in the support of the applicant. Assistance can be in the form of money or by providing shelter or care of the parent, or providing other needs such as clothing, paying for insurance and medical care.

b. Sources

(1) Personal interview with child
(2) Correspondence with other county departments
(3) Use of DPW Form 11 (Revised)

c. Comments

The investigation of children's responsibility demands tact and consideration, so as not to cause friction between parents and child.

If the parents have been self-supporting, they may hesitate to have their children approached. If there is antagonism between them, there may be unwillingness on the part of the parents to have their children approached for assistance. Frequently, the son and daughter, when they have homes and families of their own are unwilling or unable because of lack of space to offer shelter to their parents, but might partially support them by giving clothing, commodities and perhaps a definite monetary allowance.

In approaching the children, the visitor should secure information as to how they have already helped their parents and they should be given an opportunity to care or plan for them before assistance from public funds is given.

The visitor should be conscious that the children of the applicant may have responsibilities which require all of their funds and that if they give assistance to their parents, it would be necessary for the children to secure relief to meet their needs.

In summary, every effort should be made to secure information on each child's ability to support the applicant. Where a child is contributing to the support, he should continue to do so unless his own financial responsibilities make it impossible. If he is not contributing to the support of his parents and is able to do so, every effort should be made to impress him with his legal responsibility.

3. Responsibility of Other Relatives

a. Purpose

It is important to determine whether there are any relatives of applicant who are able and willing to give or to continue to give either monetary assistance or assistance in the way of food, clothing etc., or to keep or take the applicant into his or their home for either partial or complete care.

b. Source

A personal visit should be made to relatives who are or should be interested in the applicant and who live in the county, stating the purpose of the visit. If a relative lives in another county in the state and if it is desirable to contact him, a letter should be written to the county department of that county, with the name of the applicant, name and full address of the relative and relationship to the applicant. Such letter should set forth the exact information the county department is desirous of securing from the relative.

c. Comments

There may be certain relatives who would be able to care for a blind applicant in their home if partial assistance is granted to the blind person.

From relatives information may be secured in regard to health of the applicant; capability of applicant to handle money or care for himself; addresses of children, which applicant may not know; and other information necessary in determining the applicant's eligibility or in working out plans for his care.

4. Present Living Arrangements

a. Purpose

The needs of the applicant for shelter, fuel and lighting should be ascertained.

The visitor should be able to give a brief account of applicant's living arrangements so that the county director or other persons can visualize the conditions under which the applicant is living.

b. Sources

Information should be secured by observation of the visitor at the time of the home interview.

5. Health

a. Purpose

It is important to inquire into the general health of the applicant and to obtain information relative to the adjustment he has made to his blindness. His ability to care for himself and to handle his grant of assistance may have a bearing on the amount of "personal care" required. Likewise, it is important to determine if the applicant is in need of medical assistance for general health problems; and if he has applied for eye treatment this is very important, particularly if surgery is contemplated. If the applicant is in an institution and is desirous of leaving, it should be determined definitely whether or not he is physically and mentally capable of caring for himself or whether continued institutional care would be the best plan for him.

b. Sources

The following should be helpful in securing information regarding the health condition of an applicant:

Family Physician
Physician or head of an institution or hospital in which he has had care
Relatives, especially children who have been in close contact with the applicant
Recent hospital records
Health or other agencies to whom applicant is known.

c. Comments

The report of a physician, generally, will be the most reliable.

When asking for information from physicians, institutions, hospitals or agencies, the visitor should always explain that the person about whom he is inquiring is making application for blind assistance and before such assistance is granted they may be able to give information which would be helpful in making a more adequate plan for care of the applicant.

If the applicant is, or has been, in an institution or hospital, pertinent information about him, supplied by the head of the institution or hospital, should be set forth in the narrative record.

A person in a public institution who has made application and meets all the requirements for blind assistance except residence outside of an institution must not be granted assistance until an acceptable plan has been made for him.

An acceptable plan may be residence in a private institution or boarding home, or relatives may take him into their home if they can have help to meet the added expense. The relatives may be able to provide room and pay for the applicant's insurance and yet not be able to feed and clothe him. Assistance could then be granted the applicant in an amount sufficient to provide for those things not met by the relative.

An applicant who is living with children or other relatives may want to live alone if blind assistance is granted, and it should be determined definitely if applicant is able to care for himself. In many cases of this kind, it might be better if the applicant remained with a relative; and if the relative is not able to care entirely for the applicant, to grant assistance to meet the applicant's requirements which the relative cannot meet.

d. Procedure for Securing Information from State Hospitals

(1) Use of DPW Form 71 (Revised) (See sample of Form 71 (Revised) at end of Chapter II, Section 4)

In order to facilitate the obtaining of information from the records of former or present patients at Coleman or Long Hospitals, the following suggestions are made: County departments desiring such information should write directly to J.B.H. Martin, Administrator, Indiana University Medical Center, 1040 - 1232 West Michigan Street, Indianapolis. Requests should not be sent to the Marion County Department of Public Welfare. DPW Form 71 (Revised) is prescribed for this purpose and special attention is called to the following items:

(a) The full name of the patient should be given as well as any other names or spellings utilized.

(b) The dates of hospitalization should be set forth as accurately as is possible.

(c) The specific information required should be stated so that there will be no confusion in answering the inquiry.

(2) Procedure for Securing Information From Veteran's Bureau Hospital

Any time it is necessary to secure information concerning a person who is or has been a patient in the Veteran's Bureau Hospital, the following statement should be attached to DPW Form 71 (Revised):

To: The Veteran's Bureau Hospital

You are hereby authorized and requested to release any and all information which you may have concerning me to the County Department of Public Welfare of the aforementioned county.

_____
Signature in Full of Veteran

This statement should be signed by the veteran, for if it is not the hospital will not release the information. The form should be mailed directly to Fred Smith, M.D., Veteran's Bureau Hospital, 2401 Cold Spring Road, Indianapolis, Indiana. DPW Form 71 (Revised) may be obtained from the state department upon request.

6. Occupation

a. Purpose

The purpose of securing information concerning present and former employment is to determine:

If the applicant is working, to what extent his earnings can meet his requirements.

If employed, to obtain, if possible, the length of time employment will continue.

If unemployed, to learn possibility of returning to his former employment.

To determine the advisability of referring applicant to Board of Industrial Aid for the Blind for vocational service when such is desired.

b. Sources

Present employer, if any.
Previous employers
Board of Industrial Aid for the Blind when applicant has been known to that agency

c. Comments

Contacts with the employers may be made by personal call, by letter or by telephone. In asking for information by any of the above methods, it is only fair that the employer should be given the reason why the visitor is making inquiries, namely that his employee or former employee is making application for assistance to the blind and an investigation is being made to determine his eligibility for such assistance.

Since the Board of Industrial Aid for the Blind is interested in vocational training for the adult blind, it is important to know the work history of an individual as a guide in making a referral to this agency. (See the statement on the functions of Board of Industrial Aid for the Blind, Chapter IV, Section 2).

If the applicant is soliciting alms, some mention should be made of his attitude toward this since his eligibility will depend, among other things, upon his willingness to give up this practice.

The following information, when pertinent in a particular case, may be secured from the present employer.

Weekly wages for the past twelve months and probable wages for next twelve months.

Whether work is likely to continue and for how long.

Whether applicant is receiving or is eligible for a company pension or other benefits.

Sometimes a visitor will find an applicant performing a task which indicates that he possesses a greater degree of sight than the eye examination indicates. For some applicants the eye physician is unable to ascertain the degree of blindness because of lack of cooperation. When a case like this is found, it will be well to request authorization from the state department for a second eye examination and require the applicant to submit to another examination where special care may be given to ascertain definitely the degree of sight.

7. Real Estate

a. Purposes

The purposes of securing detailed information on real estate are:

(1) To ascertain and verify the total value of applicant's interest in any real property and the amount of his income therefrom, as a basis for determining the following:

(a) Applicant's eligibility for assistance (Section 52, subsection (c), The Welfare Act of 1936).

(b) If eligible, the amount of assistance to be granted, (Section 54, The Welfare Act of 1936).

(c) What, if any, property or income applicant owns or has acquired over and above that stated by him in his application, DPW Form 40 (Revised), Section B, items 1, 2, and 3 which might terminate or change the amount of assistance granted to applicant and which would determine the amount that the State Board is entitled to recover in case of assistance excessively granted. (Section 68, subsections (a) and (b), The Welfare Act of 1936).

(d) What recovery, if any, can be made from the estate of the recipient after death. (Section 69, The Welfare Act of 1936).

(2) To ascertain and to verify the amount of any mortgages or other encumbrances which would alter applicant's net interest in real property.

(3) To learn and to verify the amount of taxes, the amount of payments due on mortgages and any other debts which should be considered in determining applicant's obligations.

b. Sources

The main sources of verifications for real property are:

Tax bills, for current or preceding year
Records of township assessor
Records of county treasurer
Records of county recorder

Mortgage statements and receipts held by applicant
Building and loan association books
Records of person or firm holding mortgage or to whom payments are made on contract.

c. Comments

(1) Assessed Valuation and Taxes

The assessed valuation is the basis to be used in determining the value of applicant's real property. In the home interview this may be ascertained from a current or a last year's tax bill in the following manner. The tax bill will give:

The amount, if any, of the mortgage exemption
The assessed valuation of personal property, if any
The net valuation on which the tax is computed.

To get the gross assessed value of the real property from the above information, subtract the amount of the personal property valuation from the net valuation and to that add the amount of the mortgage exemption. Thus, if as shown on the tax bill the personal property is valued at $100 the mortgage exemption is $900 and the net valuation is $2,000 then the net valuation of $2,000 minus personal property valuation of $100 equals $1,900, the net real property valuation. $1,900 plus the $900 for mortgage exemption equals $2,800, the gross assessed value of the real estate.

The mortgage exemption cannot exceed fifty percent of the assessed valuation, nor can it in any case exceed $1,000, and it can be taken on only one property of a tax payer. Occasionally, an additional exemption of $1,000 made in favor of disabled soldiers may be found. If so, this must be added to the gross assessed value which in the case previously cited would make the aggregate value $3,000.

To ascertain the annual tax on real estate from a current or a last year's tax bill two situations may occur:

If no personal property valuation is listed on the bill then the stated amount of current tax represents the semi-annual real estate tax which should be doubled to give the annual amount, provided that if a poll tax is listed this must be deducted, from the annual figure.

If the amount of personal property valuation is listed on the bill, then subtract this amount from the net valuation stated on the bill and multiply the result by the tax rate per hundred stated on the bill, which will be the annual tax for the real property. Thus, in the above cited case, if the tax rate per hundred is $3.00, the calculation would be $1,900 time $3.00 per hundred equals $57.00. This is the figure which should be entered on DPW Form 4 (Revised) under "Annual Taxes".

If in the home interview no tax bill is available, the assessed valuation and the amount of current and any delinquent taxes can be verified by the county treasurer. In any case, in which the county treasurer is unable to identify definitely the property from the name of the applicant, it will be necessary to contact the assessor of the township in which the property is located to get a legal description of the property. With this description and the name of the applicant, the county treasurer can then give full information as to assessed value and taxes.

If applicant has a tax bill, it indicates that he owned the property at one time, although not necessarily at present. For most purposes, this presumption of ownership will be sufficient. If it is considered necessary, in any case to verify title, this can be done through the office of the township assessor or of the county recorder.

In many communities, it might be advisable to secure some blank copies of tax bills so that visitors may familiarize themselves with the various headings. The county treasurer or a representative of his office might be asked to explain the procedure on assessed valuation and taxes more in detail.

(2) Value of Applicant's Interest

This is a monetary statement of applicant's proportional interest in the property. If four persons hold the title equally and the gross assessed valuation is $2,400, then applicant's interest is one-fourth, or $600. In many cases, the property will be owned by husband and wife as tenants by entirety. This is a joint estate and upon the death of either, the entire interest in the property passes to the surviving spouse. Where property is held as tenants by entirety, enter "By Entirety". If the interest is of such a nature that it is difficult to estimate its financial value, an explanation should be made in the narrative record.

(3) Mortgages and Purchase Contracts

When the applicant has entered into a mortgage agreement or purchase contract with an individual or firm other than a building and loan association or the Home Owners Loan Corporation, the visitor should verify the balance due on the loan at the time the investigation is made as well as the total of any account or delinquent interest payments.

Where a mortgage is held by a building and loan association or by the Home Owners Loan Corporation, verify the amount of principal due, total amount of delinquent monthly payments, and the amount the purchaser or mortgagor has agreed to pay each month.

(4) Income from Property

Income from property will usually be in the form of rent from tenants or roomers. Compensation for advertising privileges, mineral rights, pasturage, etc., should not be overlooked.

(5) Total Value of Real Estate Owned by Applicant

Where it is disclosed in the investigation that the total value of the applicant's real property is greatly in excess of, or substantially less than, the amount stated in his application, DPW Form 40 (Revised), it will be necessary for the applicant to execute a new application. If the difference is inconsequential, a new application is unnecessary.

(6) Applicant's Interest in Real Estate - Effect on his Eligibility

The Welfare Act of 1936 makes no provisions for the maximum amount of property an applicant may own to be rendered ineligible for assistance to the blind. The amount of property which any applicant may own and still remain eligible for assistance to the blind under the present law is a question which must be decided on the merits of each individual case. The mere fact that he does possess property of substantial value would not, in itself, make him ineligible for assistance, since he may not have sufficient resources to provide him with a reasonable subsistance compatible with health and decency.

Any property which an applicant owns in addition to that in which he is residing normally should be productive of an income which would render him ineligible for assistance or decrease the amount of assistance needed.

8. Personal Property

a. Purposes

To ascertain and to verify applicant's interest in all personal property of substantial value and the amount of his income therefrom, as a basis for determining:

Applicant's eligibility for assistance (Section 52, subsection (c), The Welfare Act of 1936).

What, if any, property of substantial value or any income applicant owns or has acquired over and above that set out in his application, DPW Form 40 (Revised), Section B. items 1, 2 and 3, which might terminate or change the amount of assistance recommended or the amount that the state board is entitled to recover in case of assistance excessively granted. (Section 68, subsection (b) of The Welfare Act of 1936).

b. Sources

Some sources of verification of items included under personal property are:

Bank, building and loan association or post office saving books
Bonds or certificates of stock
Combined judgment of applicant and visitor
Records of savings institutions
Records of county assessor
Records of auto license department
Stock market quotations
Opinion of bankers, merchants or others qualified to advise on certain items
Statements and receipts in possession of applicant for purchases

c. Comments

Savings Institutions and Use of DPW Form 14, Bank Clearance

When the visitor has ascertained or has reason to believe that applicant has a savings account, a check should be made.

There are three classes of institutions in which an applicant

is most likely to carry an account: banks, post offices and building and loan associations. Such organizations usually are reluctant to give information concerning the status of a savings account and procedure will vary with individual communities. In some communities, it may be possible to obtain complete information without recourse to any set form, since the county department is given authority in the application, DPW Form 40 (Revised), to obtain information about applicant from all sources. In other communities, a written authorization is always required for which purpose a form is incorporated herein, DPW Form 14, Bank Clearance, which should be signed in duplicate by the applicant. (See sample of DPW Form 14, Bank Clearance, at end of Chapter II, Section 4.) DPW Form 14 may be used when postal authorities require written authorization to release information concerning postal savings accounts; in cases where this form is used for this purpose, the individual's account number should be indicated.

Where a bank or loan association is permitting only limited withdrawals, verification of the maximum amount obtainable should be made. If a bank or loan association knows the applicant is in need, it may make an exception and permit larger withdrawals. A pertinent inquiry in some cases might be whether applicant recently has changed or transferred his account to another person or name.

If the account is in the name of several persons, including applicant, his exact interest should be determined. In contrast to real estate, cash is readily obtainable from an account and it is never safe to presume that applicant has a one-third interest merely because three people are involved. Circumstances attendant upon deposit of the money, source of the funds and relationship between the parties are some factors which bear on a decision as to what portion of the account the applicant owns.

In some communities, there may be numerous accounts in credit unions; if so, the procedure should not be materially different from that used for banks.

Other Miscellaneous Personal Property

A record should be obtained of each item or group of items of personal property of substantial value. Items of inconsequential value such as furniture and clothing should be excluded unless there is a large amount in evidence. In evaluating personal property in the home interview, a figure should be reached by the visitor after carefully considering the values suggested by applicant. If his approximation is low or high,

the visitor may discuss this point so that the final figure entered in DPW Form 4 (revised), column "Value of Applicant's Interest", should represent the combined judgments of both applicant and visitor. If the personal property is of a nature requiring technical appraisal, the final figure should be a matter of supplemental investigation reported in the narrative record.

The value of stocks or bonds with an exchange listing should be the most recent market quotation. If applicant should possess stocks or bonds not listed on an exchange, the county assessor or a local banker can probably assist in verifying the value put upon them by the applicant. Applicant should be encouraged to give thorough information on this last class of securities since some which he considers valueless may be of real worth.

Applicant's Interest in Personal Property - Effect on His Eligibility

Consideration of personal property, in respect to the eligibility of the applicant is somewhat different from real estate, in that personal property is more readily convertible into cash. What constitutes an asset which should be converted into cash before assistance is granted, is a question which must be decided individually in each case. When it has been determined that the applicant has assets in excess of the standard resource allowance (See Chapter II, Section 5, Standard Resource Allowance) recommended by the county department and approved by the state department, the excessive assets must be converted into cash and utilized before he may obtain or continue to receive blind assistance, except in those cases where the adjustment of such resources to the standard resource allowance is impossible. Whenever the assets are equal to or less than the standard resource allowance, the state department may, as a condition of eligibility, require that the applicant enter into some arrangement whereby this resource will be set aside for burial purposes, but this procedure will not be followed by the state department at the present time.

Where applicant possesses items of personal property, including income, substantially in excess of what he has listed in DPW Form 40 (Revised) a new application should be executed.

9. Debts

a. Purpose

Important debts are listed and verified to obtain clues as to income and often to prove residence requirements. Consideration

of obligations of responsible relatives is sometimes necessary to assist in establishing their ability to assist the applicant.

b. Sources

Verification can be had from:

Statements and bills
Installment books
Receipts and records of person or firm selling or serving applicant.

c. Comments

Often a creditor of long standing may have information valuable to the visitor in verifying certain phases of the applicant's eligibility. The creditor's record may reveal regular and perhaps substantial recent payments on the debt. The importance of this indication of an income depends on what facts were learned in the home interview. While procurement of such information may be important, it does not warrant discussion of the applicant's affairs, and its reliability should be tested in the light of the creditor's position to the applicant.

A creditor may request information concerning applicant or request that an allowance be made sufficient to take care of the debt, but the visitor should endeavor to interpret the reason for making the verification of the debt status. The creditor's complaint of lack of cooperation in this respect may be satisfied when he understands the limitations of the assistance program and why his help is needed in assisting the county department to complete the verification of eligibility.

10. Insurance (See Old Age Assistance Manual, Chapter II, Section 4, Pages 26 - 41, Item E, Paragraphs 1-4 (inclusive) for further details)

11. Pensions and Compensation

a. Purpose

To verify the amount of any pension or benefits received by applicant.

To determine if applicant is eligible for benefits which he is not receiving.

b. Sources

Information regarding the pension or benefits or similar compensation may be secured from:

Agency or company or governmental unit paying the pension of benefits.

Pension or benefit checks in possession of applicant or governmental unit.

Letters from agency or company to applicant regarding pension or benefits.

Court or legal proceedings when blindness is a result of accident.

c. Comments

The amount of the pensions or benefits should be determined before recommending assistance. Information should be secured regarding the exact amount of the pension or benefits, the length

of time such will be paid the applicant, and how long applicant has been receiving such pension or benefits. By knowing this, the visitor can determine whether or not the applicant has been able to care for himself in the past without assistance to the blind and thus could continue being independent without such assistance.

The visitor should contact any agency or company or governmental unit if he feels from information secured from the applicant that he is eligible for a pension or benefits. If this can be secured he may not be in need of assistance, or may need only assistance to supplement the pension or benefit amount.

Some aged blind people may be in receipt of Civil War pensions because of their blindness. Particular attention should be paid to the possibility of such a pension when the applicant is a son or daughter of a Civil War veteran.

Special inquiry should be made to determine if the applicant now carries or has recently carried any sick or accident policies, or if he carried any group insurance or was a member of a mutual benefit association at his last place of employment, from which he might be able to derive benefit if proper application were made.

Special inquiry should be made also as to the cause of blindness. If it was from accidental means, he might be entitled to collect compensation in the form of damages or if the blindness was caused or occurred while employed, the applicant might be entitled to compensation under the Workmen's Compensation Act. Care should be taken in case of the above that the applicant is not given the idea that he is entitled to collect either damages or compensation until such time as the visitor is certain.

(1) Old-Age and Survivors Insurance

General Information

Briefly, under the Federal old-age and survivors insurance program monthly benefits ranging from $10.00 minimum to $85.00 maximum in any one case will be paid subsequent to December 31, 1939, to persons eligible to receive in accordance with the qualifying provisions of Title II of the Social Security Act as amended. Technical information regarding definitions and eligibility for old-age and survivors insurance is contained in handbooks which have been issued by the Federal Security Agency and in the compilation of the Social Security Laws, all of which may be found in the files of county

department offices. Supplemental information may be secured as desired from the nearest field office of the Bureau of Old Age and Survivors' Insurance. It is not essential for county workers to know all phases of eligibility for federal old age and survivors' benefits or to know the formulae for determining the amount of benefits. However, it is highly desirable that each worker know as much as possible about all phases of eligibility and payment of benefits.

In any discussion of this program, frequent use is made of the following terms which are defined below:

"Covered employment" is that employment which is subject to the old age retirement tax.

A "quarter of coverage" is any calendar quarter; that is, any three months beginning the first of January, April, July, or October, since January 1, 1937, in which an employee is paid $50.00 or more in covered employment, regardless of whether he is more or less than 65 years of age, except that wages earned after attainment of age 65 and before January 1, 1939, cannot be counted in determining quarters of coverage.

A "fully insured" worker must have "quarters of coverage" equal to half the number of quarters after 1936 (or his 21st birthday if it is later) and before the quarter in which he became 65 or died; but in no case less than 6 quarters of coverage; when a worker has 40 quarters of coverage, he is "fully insured" regardless of his employment thereafter. A fully insured worker is entitled to retirement benefits at age 65 and supplementary benefits are payable to aged wives or dependent children of workers receiving retirement benefits. Upon the death of the insured worker, survivors' benefits are payable to aged widows, aged parents, dependent children or widows with such children in their care. Lump-sum death benefits are payable when there is no survivor entitled to monthly benefits.

A "currently insured" worker must have had at least six quarters of coverage in the twelve quarters immediately preceding the quarter in which he died. The survivors of a currently insured worker are eligible for survivors' benefits only which are payable for dependent children or to widows with such children in their care, or as lump-sum death benefits when there is no survivor entitled to monthly benefits.

Those persons eligible to receive in accordance with the qualifying provisions of Title II of the Social Security Act as amended are as follows:

1. A fully insured worker, man or woman, who has attained the age of 65 and (1) quits work in covered employment, or (2) who earns less than $15.00 per calendar month in covered employment, or (3) who has a job that is not covered by the law.

*2. The wife of a wage earner receiving Federal old-age insurance payments when she reaches the age of 65, if living with or supported by her husband at the time of filing her application for benefits.

*3. The widow of a deceased fully insured individual who has not herself remarried and who is over 65 years of age.

*4. A dependent unmarried child under the age of 16, or 18 if still in school, of a wage earner receiving insurance payments.

*5. A widow, having in her care a dependent child or children under the age of 16, or under the age of 18 if still in school, of a currently or fully insured individual who has died subsequent to December 31, 1939.

*6. A dependent child under 16, or under 18 if still in school, of a currently or fully insured individual who has died subsequent to December 31, 1939, if dependent upon such individual at the time of his death.

*7. The parent of a fully insured individual who dies subsequent to December 31, 1939, leaving no surviving widow or no unmarried surviving child under the age of 18, if such parent is 65 and was wholly dependent upon and supported by the individual at the time of his death.

8. Upon the death, subsequent to December 31, 1939, of an individual who died a fully or currently insured individual leaving no dependent, who, at the time of his death, is entitled to monthly insurance payments, a lump-sum payment will be made to other persons specified in the law, as follows:

*The provision that a person is ineligible for benefits who earns more than $15.00 per calendar month in covered employment applies to persons receiving supplementary benefits and survivors benefits, as well as the insured individual.

To the widow who is not entitled to monthly insurance payments or to the widower;

If there is no widow or widower, then to any child or children regardless of age;

If there is no widow or widower or child, then to the parents;

If there is no such relative, then to the person or persons who pay burial expenses.

A federal old-age or survivor's benefit for purposes of public assistance is to be considered as a resource just as any other monetary income. Hence, before investigation of an application for blind assistance is completed, it must be determined whether the applicant is eligible for federal benefits and, if eligible, in what amount and when benefits will begin. Receipt of benefits will not render a blind person ineligible for blind assistance unless the benefits are sufficient to meet his need. The county department shall not take final action on any application when there is reasonable evidence that the applicant is eligible for federal benefits, until a statement is received concerning such eligibility. As far as applications for blind assistance are concerned, it will be the responsibility of the county department to determine presumptive eligibility for federal benefits of all applicants in the following classes:

1. A man or woman, age 65 or over, applying for blind assistance, whose employment record indicates at least half as many quarters of coverage as have elapsed after 1936 and up to but excluding the quarter in which he or she attained the age of 65, providing there have been at least 6 quarters of coverage, and who at the time of application is unemployed, employed in a job not covered by the law, or earning less than $15.00 per calendar month in covered employment.

2. A woman, age 65 or over, living with her husband who is a fully insured beneficiary of Federal old-age insurance.

3. The widow of a deceased fully insured individual who has not herself remarried and who is over 65 years of age.

4. A widow, having in her care a dependent child or children under the age of 16, or under the age of 18 if still in school, of a currently or fully insured individual who died subsequent to December 31, 1939.

5. The parent of a fully insured individual who died subsequent to December 31, 1939, leaving no surviving widow or no unmarried surviving child under the age of 18, if such parent is 65 and was wholly dependent upon and supported by the individual at the time of his death.

Procedures for Verification of Benefits, and Referral and Clearance of Cases with Local Field Offices of the Bureau of Old-Age and Survivors Insurance

General Statement

Eligibility for federal benefits is to be determined by the county department in one of two ways: (1) through the allowance or disallowance letter in possession of the applicant for federal benefits, or (2) clearance with the local field office of the Bureau of Old-Age and Survivors Insurance in accordance with clearance and referral procedure outlined below. The Bureau will accept inquiries only from an authorized officer of the county department and the department must regard the information as confidential and restrict its use to purposes relating to the eligibility of applicants or recipients of public assistance or other forms of aid. The inquiry must be submitted on DFW Form 88, Request for Information Concerning Old-Age and Survivors Insurance. (See sample form at end of Chap. II, Sec. 4.)

Verification Through Use of Allowance or Disallowance Letter in Possession of the Applicant

If a claim has previously been filed, the individual should be asked to show his award or disallowance letter. If this is available, no further inquiry will be necessary and the facts in the letter constitute verification and should be recorded in the case record.

Clearance with Local Office on Cases Where Claims Have Been Filed, but Applicant is not in Possession of a Copy of his Allowance or Disallowance Letter

If the award or disallowance letter cannot be produced, four copies of the DPW Form 88, Request for Information Concerning Old-Age and Survivors Insurance, should be completed and the signature of the claimant obtained on the original. Individuals who sign by mark must have the mark witnessed by two persons. The original and two copies shall then be mailed to the field office of the Bureau of Old-Age and Survivors Insurance servicing the territory in which the county department is located and the fourth copy shall be retained in the case record awaiting the report from the field office regarding the status of the claim.

When a claim has already been filed and the field office has received a copy of the award or disallowance letter, the duplicate and third copy will be returned to the county department at the same time indicating the final disposition of the claim. The original containing the authorization for the disclosure of the information will be retained in the field office files.

In those cases where a claim has already been filed and forwarded to Washington for adjudication at the time the inquiry is made but the field office has not received a copy of the award or disallowance letter, the original and duplicate copy will be forwarded to the Bureau of Old-Age and Survivors Insurance in Washington. That Bureau will notify the county department directly of the final disposition of the claim by returning the duplicate copy. The original will be retained in the Bureau of Old-Age and Survivors Insurance in Washington.

Referral to Local Office of Those Appearing Eligible to Apply for Benefits

Selection of People to Refer and Use of DPW Form 87, Inquiry Form for Determination of Presumptive Eligibility for Old-Age and Survivors Insurance

The success of the procedures outlined here requires the cooperation of local county welfare departments in referring to the field offices of the Bureau only those cases in which there is clear evidence as to the individual's eligibility for benefits or in which the individual's employment record clearly indicates some reasonable possibility of eligibility. If the county welfare department does not assume the responsibility for carefully selecting those individuals who are referred to the field offices, the Bureau will be unduly burdened by inquiries from individuals obviously ineligible for benefits. Every case referred to the Bureau shall be reviewed by the county director or some one designated by him. In order to facilitate review of cases prior to referral, DPW Form 87, Inquiry Form for Determination of Presumptive Eligibility for Old-Age and Survivors Insurance, is recommended for use by the county department in determining whether presumptive eligibility exists. (See sample form at end of Chap. II, Sec. 4.) The use of the form is optional so far as cases known to the county department are concerned. When another relief agency is requesting clearance through the county department, however, the requesting agency shall be required to submit to the county department a properly filled copy of DPW Form 87, Inquiry Form for Determination of Presumptive Eligibility for Old-Age and Survivors Insurance, to aid the county director or person designated by him, in deciding whether or not presumptive eligibility exists and whether or not the referral procedure should be followed in any given instance.

If no claim has been filed prior to time of referral, four copies of DPW Form 88, Request for Information Concerning Old-Age and Survivors Insurance, shall be prepared and the signature of the prospective claimant secured on the original form.

The original and two copies of the form shall be placed in an envelope and given to the prospective claimant with instructions to take the forms to the servicing field office. When the person referred by the county department reports at the field office he will deliver the envelope containing the forms to an interviewer who will note the results of the interview on the third copy which will be mailed back to the county department making the referral at the close of business each day.

The original and the duplicate copy will be handled by the field office as follows:

In those cases where the person referred is obviously ineligible, the original will be returned with the third copy to the county department and the duplicate copy will be destroyed by the field office.

Where a claim is filed as a result of the referral, both the original and the duplicate copy of the form will accompany the formal claims application to the Bureau of Old-Age and Survivors Insurance in Washington. That Bureau will then notify the county department directly as to the final disposition of the claim by returning the duplicate copy. The original of the form will be retained in the claims files in Washington.

Where additional information is required by the field office, the original and the duplicate copy will be placed in the pending folder. If, after the additional information has been obtained, a claim is filed, both the original and a copy of the form will be forwarded to the Bureau of Old-Age and Survivors Insurance in Washington with the formal claim and that Bureau will advise the county department as to the final disposition of the case. The original of the form will be retained in the Washington claims files. If after the additional information is obtained, it is obvious that the individual is not eligible for benefits, the original of the form will be returned to the county department and the duplicate

will be destroyed by the field office.

The fourth copy shall be filed temporarily in the county department files pending receipt of the report of the interview from the field office.

When the copy of the form containing the report of the interview is received from the field office the county department shall make the necessary notations in the case record. However, in no instance shall a follow-up be made with the old-age and survivors insurance field office until sixty days has expired from the date of referral.

Itinerant Service

In rural areas where traveling distance to the field office is too great for convenient referral, the Social Security Board has arrangements for an "itinerant service." The county department should communicate with the old-age and survivors insurance field office to obtain a schedule of this service and to make such arrangements as are necessary to have the recipients or applicants who are presumptively eligible for insurance payments interviewed by a representative of the field office at these itinerant stations. When possible the county department should furnish the field office with a list of the names and addresses and social security account numbers of those persons who are presumptively eligible, and the social security account number and name of the insured, if the prospective claimant is other than the worker under whose account benefits may be payable. The old-age and survivors insurance office, in cooperation with the county department, will set a time and place for interviewing such individuals convenient to the group. The place selected may be the office of the county department if the field office has no other quarters in the vicinity.

Clearance for Other Local Agencies

County departments of public welfare have been designated by resolution of the State Board of Public Welfare, under date of May 14, 1940, as agents of the state department in the performance of duties prescribed by the Social Security Board in connection with the referral and clearance with the Bureau of Old-Age and Survivors Insurance of all cases referred

to the county departments for clearance by local relief giving agencies. All welfare agencies in the community, with the exception of the Work Projects Administration, may request and receive information concerning old-age and survivors insurance payments by referring their requests to the county department in accordance with the procedures outlined below. The procedure for the clearance between the Work Projects Administration agencies and the Bureau of Old-Age and Survivors Insurance will be separate and different from procedures to be followed by other agencies and will not involve the county departments of public welfare. This exception does not apply to the Unemployment Relief Commission which will clear through the county departments.

The county departments of public welfare will be responsible for furnishing to inquiring agencies within the county a supply of DPW Form 87, Inquiry Form for Determination of Presumptive Eligibility and DPW Form 88, Request for Information Concerning Old-Age and Survivors Insurance. The number of cases which the inquiring agencies will wish to clear may determine the method which the county departments will wish to use for distribution of these forms, and the method may not be the same for each agency within the county. In all cases of request for clearance by some other agency, however, the county departments shall ask inquiring agencies to submit one copy of DPW Form 87, Inquiry Form for Determination of Presumptive Eligibility, together with the proper number of completely filled copies of DPW Form 88, Request for Information Concerning Old-Age and Survivors Insurance. County Departments shall assume the same responsibility for determining presumptive eligibility in cases referred by other agencies as they do on cases known to their own departments. The information submitted on the Inquiry Form will be the county department's only means of determining presumptive eligibility in such cases.

If the information contained on DPW Form 87, Inquiry Form for Determination of Presumptive Eligibility, indicates that a claim has been filed, the county department should follow the procedure for mailing three copies of the Request for Information to the local field office, just as is done with inquiries on their own cases. The fourth copy should be retained in the office of the county department, together with the date of referral to the Bureau, so that this information may be readily available, if

inquiry is made. It is probable that county departments will wish to advise other agencies that in most instances, when the Inquiry Form indicates that a claim has been filed, claimants should not be sent to the county office, but the forms should simply be sent for forwarding to the Bureau. This procedure would simplify the process by making it unnecessary for the county department to interview the claimant.

If the information contained on DPW Form 87, Inquiry Form for Determination of Presumptive Eligibility, indicates that no claim has been filed and that the claimant should make a personal contact with the field office, it will be necessary for the county department to make suitable arrangements with the inquiring agency. The procedure used in such cases will necessarily vary, depending somewhat on whether the county has itinerant service, or whether a field office is conveniently located in the area. When itinerant service is not in use, it may be advisable for the county department to ask the inquiring agency to send the claimant to the county department, so that if he appears to be eligible to file a claim, he may be given the necessary copies of DPW Form 88, Request for Information Concerning Old-Age and Survivors Insurance, to take with him to the field office of the Bureau. If itinerant service is used, it will be necessary for the county department to notify the inquiring agency of the time and place such service will be available, so that this agency may in turn notify the claimant. If the itinerant service is to be located in the office of the county department on the day the service is to be available, it will probably be advisable for the county department to retain all copies of the Request for Information, so that they may be readily available, and notify the inquiring agencies of the names of the claimants who should be asked to report for an interview. If the itinerant service is to be held elsewhere in the county, three copies of the Request for Information should be returned to the inquiring agency to be held until they have been notified of the time and place of the service. As in the situation where the claim has already been filed, the county department should retain the fourth copy of the form together with information concerning the disposition of the other copies, so that the information may be readily available, if inquiry is made.

If the information submitted by the inquiring agency on DPW Form 87, Inquiry Form for Determination of Presumptive Eligibility, indicates that the claimant is clearly ineligible, the county department should not forward the forms to the Bureau of Old-Age and Survivors Insurance nor direct the claimant to that office, but should instead report to the inquiring agency the reason for ineligibility.

Field Offices of the Bureau of Old-Age and Survivors Insurance

The list of old-age and survivors insurance field offices to which the Request for Information, DPW Form 88, and requests for itinerant service are to be directed, their addresses and the counties served by them is as follows:

ANDERSON, Anderson Bank Bldg., 931 Meridian St.
Services Madison County

BLOOMINGTON, Citizens Bank Bldg., Annex, 211 West Fifth St.
Services Lawrence, Monroe, Morgan, Bartholomew, Brown Counties

ELKHART, 506 Monger Building
Services Kosciusko, Elkhart, LaGrange Counties

EVANSVILLE, 302 Federal Building
Services Daviess, Pike, Vanderburgh, Knox, Dubois, Warrick, Gibson, Spencer, Martin, Posey Counties

FORT WAYNE, Post Office Building
Services Noble, Huntington, Steuben, Allen, DeKalb, Adams, Wells, Whitley Counties

GARY, 213 Post Office Building,
Services Porter, Lake Counties

HAMMOND, Lloyd Bldg.,
Services Lake County (Part)

INDIANAPOLIS, 307 N. Pennsylvania St.
Services Marion, Boone, Hendricks, Hamilton, Johnson, Shelby, Hancock Counties

KOKOMO, 105 West Sycamore Street
Services Miami, Howard, Tipton, Grant, Cass, Wabash Counties

LAFAYETTE, Post Office Bldg.
Services Montgomery, Benton, Fountain, Tippecanoe, Clinton, Carroll, Newton, White, Jasper, Warren Counties

MUNCIE, Chamber of Commerce Bldg.,
Services Delaware, Henry, Jay, Randolph, Blackford Counties

NEW ALBANY, Elsby Bldg.
Services Perry, Crawford, Scott, Switzerland, Clark, Harrison, Jefferson, Jackson, Jennings, Washington, Floyd, Orange, Ohio Counties

RICHMOND, 401-403 Medical Arts Bldg.,
Services Decatur, Fayette, Rush, Dearborn, Ripley, Franklin, Wayne, Union Counties

SOUTH BEND, 161 Post Office Bldg.,
Services Fulton, Marshall, Starke Pulaski, St. Joseph, LaPorte Counties

TERRE HAUTE, 815 Ohio Street
Services Putnam, Parke, Vermillion, Greene, Clay, Sullivan, Vigo, Owen Counties

(2) Unemployment Compensation Benefits

(a) General Statement

Since 1936, employers of eight or more persons in Indiana (and others who have chosen to) have contributed to the Unemployment Compensation Fund which provides weekly benefits for their employees during periods of unavoidable unemployment when they are able and willing to work. These weekly benefits are payable to eligible employees unemployed on and after April 1, 1938.

A person is eligible to receive weekly benefits on and after April 1, 1938, if

He becomes unemployed on or after that date;

He has worked, at times since January 1, 1937, for one or more employers subject to the Indiana Unemployment Compensation Law;

He has received a certain minimum amount of earnings prior to the time he became unemployed;

He is able and willing to work but no work is available, and

Having met the above requirements, he has registered at the nearest state employment office, filed a claim for benefits, and served the prescribed waiting period.

If a county department thinks that a person may be eligible for benefits, he should be referred to the nearest state employment office. Any unemployment compensation benefit should be considered as a resource in the determination of the amount of need.

(b) Use of DPW Form 95, Request for Statement from Deputy of Unemployment Compensation Division

This form is to be used by the county department of public welfare to request information from the unemployment compensation division relative to the amount of benefit an applicant or recipient of blind assistance, or one of his responsible relatives may be eligible to receive. Since it is necessary to have a verification of all resources as well as the needs of the applicant or recipient in order to be able to make a recommendation for an award, this form is intended to facilitate the securing of that information pertaining to possible unemployment compensation benefits.

This form is divided into two sections. The upper half of the form should be signed by the applicant, recipient, or responsible relative and taken by him or sent by the county department to the deputy of the unemployment compensation division at the employment service office serving the area in which the applicant had employment. On receipt of the DPW Form 95 by the deputy, the information pertinent to the person's status for unemployment compensation will be recorded on the lower half of the form and returned to the county department which made the inquiry.

(c) Instructions for filling out DPW Form 95, Request for Statement from Deputy of Unemployment Compensation Division

Care should be taken that the section of the form to be filled out by the county department and signed by the applicant, recipient, or responsible relative at the request of the county department contains accurate information. That section of the form above the dotted line is the only part to be filled in before it is sent to the proper state employment service office.

Name of County Director

Fill in the name of the director of the county department which is requesting the information.

Department of Public Welfare of_____County at_____
Indiana

Fill in the name of the county and the name of the town or city in which the county department making the request is located.

Applicant's Signature

The name of the applicant, recipient, or responsible person about whom the inquiry is being made should appear in this space. This must be the signature of the applicant, recipient, or responsible relative and must appear in his handwriting. If he is unable to sign his name, he may sign by mark, which must be witnessed by two people who must sign their names and designate their addresses.

Address

Indicate here the address of the applicant, recipient, or responsible relative.

Social Security Number

Record here the social security number which has been assigned to the applicant, recipient, or responsible relative.

(d) Use of Unemployment Compensation Form 503

Since the information returned to the county department will show only the total benefit and the maximum weekly rate at which the benefits will be paid during the benefit period, if the person is eligible, the amount which the applicant, recipient, or responsible person actually receives week by week must be verified from another source as the weekly benefit payments may vary. Each individual receiving unemployment compensation benefits is given a card, U.C. 503, on which is recorded the amount of each weekly payment at the time it is paid. In all instances, the visitor should ask to see this card (U.C. 503) so that verification of the amount of the weekly benefit payments may be made. It should not be assumed that the eligible person will receive the maximum weekly payment each week.

The visitor should keep in mind the fact that any income received by a person eligible for unemployment compensation benefits is subtracted from the maximum weekly rate. Consequently, if the weekly payments recorded on his U.C. 503 card are less than the weekly rate reported by the local deputy on DPW Form 95, the visitor will know that an income other than unemployment compensation benefits has been received during those weeks.

12. Assistance in Kind

a. Purpose

In order to measure the need of the applicant or recipient, it is necessary to determine the kind and value of all contributions other than money that he is receiving and will continue to receive. This information will serve as a basis to determine the amount of cash which he needs to meet those requirements not being satisfied by continued contributions in food, clothing, shelter, etc.

b. Sources

Interviews with those making the contributions
Letters or written statements from those making contributions
Records of organizations assisting the applicant

c. Comments

It is expected that many applicants will continue to receive a part of their living requirements from their children, other relatives, friends, churches, fraternal organizations, and the like. Where contributions are made in commodities or services, for example, a son supplying the applicant with room or with board, a brother giving him clothing, a church regularly supplying fuel, a fraternal organization paying his water or light bill, the visitor should ascertain if such contributions will be continued regularly and record these contributions in the appropriate part of the narrative record.

In summary, as a result of the information obtained, and the verification of such information, the visitor should have obtained a complete picture of all contributions other than money which the applicant will be likely to receive regularly to meet all or part of

his requirements.

13. Farm Income

a. Purpose

In order to determine an applicant's eligibility to receive blind assistance, it is necessary to consider his needs in relation to his total resources.

In instances where the applicant or recipient lives on his own farm or with relatives whose chief income is from a farm, it has been difficult to determine the net income from farm operations.

In order to facilitate the establishing of the eligibility of applicants or recipients who are operating farms or who are living with relatives who are operating farms, DPW Form 99, Yearly Farm Record, is offered for the use of the county departments in situations in which it appears to offer help in comparing the operating expenses with the income received from the property. The use of the form is not mandatory.

b. Instructions for the Use of DPW Form 99, Yearly Farm Record

For instructions for filling out DPW Form 99, Yearly Farm Record, reference may be made to the Old Age Assistance Manual, Chapter II, Section 3, Item II, D. 13.

E. PROPERTY RECENTLY DISPOSED OF OR TRANSFERRED

1. Purpose

Section 52, subsection (e) of The Welfare Act of 1936 provides as a

condition of eligibility for blind assistance that the applicant, within five years prior to the date of application, has not assigned or transferred any property for the purpose of rendering him or which will render him eligible for assistance.

2. Sources

Some sources of verification of a transfer of property are:

Records of township assessor
Records of county recorder
Records of financial institutions
Statements and information furnished by reliable persons
Receipts or papers dealing with the transaction
Transfer records in County Auditor's office

3. Comments

The transaction must be considered in the light of circumstances existing at the time it took place and a presumption exists in favor of the applicant that such a disposal was made in good faith. If no reasonable amount of compensation was involved, as in the case of a gift, or if other circumstances indicate lack of good faith, then the presumption in favor of the applicant disappears and the transaction should be subjected to the closest scrutiny. This applies to real estate, savings accounts, insurance policies, farm equipment and stock or any other property of substantial value.

If, however, an individual applying for blind assistance transferred real estate or other property of substantial value prior to the effective date of The Welfare Act, March 18, 1936, such transfer of property would have no effect upon his eligibility, with the possible exception, that if the transfer of property was made only a few days before signature to this act by the Governor, such transfer might be considered in determining eligibility of the applicant, subject, of course, to an investigation of the facts surrounding the transfer. It might be taken into consideration in such a case that when the act had passed either or both houses of the legislature, it was sufficiently definite to give notice to a prospective applicant that his property might be subject to a lien, and to avoid such a condition of encumbrance of his property, the applicant disposed of it before the Governor had placed his signature to the act.

In general, however, when the transaction took place prior to the passage of The Welfare Act by the legislature, it could not have been with the particular purpose in mind of becoming eligible when such purpose was not in contemplation of the lawmakers, or at least had not been made into a law by them. In this connection, it is common practice, unless the contrary intention is plainly expressed, for a statute to be given a prospective rather than a retroactive effect in its operation, which in regard to Section 32 (f) would

mean that investigations of applications for assistance would be made without reference to property transactions which took place prior to the effective date of The Act, except in the instance mentioned above.

III. INSTRUCTIONS FOR FILLING OUT STATEMENT OF VERIFICATIONS, DPW FORM 5 (REVISED)

Name
Surname, first name, and middle name of applicant.

Address
Give number of street, and city or town. When applicant resides in a rural district, enter R.F.D. number and post office.

Application Number
Enter type, code, and serial number assigned to the application.

Item 1. FULFILLS AGE REQUIREMENT

Date
It may be impossible to verify that the applicant fulfills the age requirement by one contact. Therefore, if numerous

contacts are required they will probably cover a period of several days. If more than one verification is used the date of completion for each should be indicated.

By Whom

Enter name of the visitor completing the verification of age eligibility.

Source and Location of Source

Indicate the date of birth which has been verified. In blind cases, if the date of birth indicates that the applicant is 30 years of age or more no verification is necessary. In such instances, however, the date of birth of the applicant should be indicated in the space reserved for source of verification. When age is verified by documentary evidence, sufficient information should be included here concerning the nature and whereabouts of such evidence, so that there will be no difficulty in locating it at some future time, should it be necessary. When several sources have been used, record all the sources by which eligibility has been established. When age has been verified by the use of an affidavit, reference should be made to the affidavit or affidavits which may be found in the case record. Include for the purpose of identifying the proper affidavit, the name of the person making it, the date signed, and the date of approval of use of the affidavit by the district representative.

Item 2. IS A CITIZEN OF THE U. S.

Date

Record the date on which visitor completed the verification that the applicant is a citizen of the U. S.

By Whom

Enter name of the visitor completing the verification.

Source and Location of Source

When citizenship is verified by documentary evidence, sufficient information should be included here concerning the nature and whereabouts of such evidence, so that there will be no difficulty in locating it at some future time, should it be necessary. When there seems to be no doubt regarding citizenship, the place of birth of the applicant should be indicated

and reference made to the part of the narrative which substantiates this conclusion on the part of the visitor. When citizenship is complicated by circumstances surrounding the birth or marriage of the applicant, it may be desirable to make reference to the part of the narrative record which explains the details of the situation, but the verification form should also contain the required information concerning the documentary evidence by which citizenship was ultimately verified.

Item 3. STATE RESIDENCE

a. Has been resident of state for a period of at least five years during the nine years immediately preceding date of application.

Date

Record the date on which verification of the above requirement is completed. If more than one verification is used, the date of completion for each should be indicated.

By Whom

Enter name of the visitor completing the verification.

Source and Location of Source

List years verified, together with sufficient information concerning the nature and whereabouts of the evidence applicable to each year, so that there will be no difficulty in locating it at some future time, should it be necessary. When residence has been verified by the use of an affidavit, reference should be made to the affidavit or affidavits which may be found in the case record. Include for the purpose of identifying the proper affidavit, the name of the person making it, the date signed, and the date of approval of use of the affidavit by the district representative.

b. Residence in State for the year immediately preceding date of application has been continuous.

Instructions are the same as for Item 3a. If it has been necessary to verify residence in more than one locality, be exact about number of weeks or months included in each verification.

Item 4. COUNTY RESIDENCE

Items A, B, and C are not applicable to blind assistance cases. In accordance with Regulation 2-114, an application for assistance as a blind person shall be made to the county department of the county in which the applicant resides, rather than to the last county in which he had twelve months continuous residence.

Item 5. HAS INSUFFICIENT INCOME OR RESOURCES

Date

Record the date on which verification of the above requirement is completed.

By Whom

Enter name of visitor completing the verification.

Source and Location of Source

The various types of verifications which determine eligibility on the basis of need must necessarily be recorded in the narrative record. The budgetary conclusions drawn from the verifications will be recorded on the Budget and Recommendation Form, DPW Form 5A (Revised). Therefore, reference should be made here to the Budget and Recommendation Form indicating the date of the form, and, if desirable, for the purpose of clarifying the conclusions reached on the budget form, reference may also be made to those parts of the narrative record which have to do with the determination of need.

Item 6. HAS NOT ASSIGNED OR TRANSFERRED PROPERTY WITHIN THE LAST 5 YEARS IN ORDER TO QUALIFY FOR ASSISTANCE

Date

Record the date on which verification of the above requirement is completed.

By Whom

Enter name of visitor completing the verification.

Source and Location of Source

If there is no evidence of transfer of property, indicate this fact in the space reserved for source and refer to that part of the narrative record which explains the methods used by the visitor to substantiate this. In all cases involving transfer of property during the five year period indicate the documentary evidence by which this fact was verified, including sufficient information concerning the nature and whereabouts of evidence, so that there will be no difficulty in locating it at some future time, should it be necessary. Where applicant has assigned or transferred property, write in "eligible" or "ineligible" and refer to the narrative record for further explanation.

Item 7. IS NOT AN INMATE OF PUBLIC INSTITUTION

Date

Record the date on which visitor called at the residence of the applicant and determined that it was not a public institution.

By Whom

Name of visitor completing the verification.

Source and Location of Source

Refer to that part of the narrative record, by date or topical heading, which describes the type of residence occupied by the applicant.

Item 8 A. IS BLIND WITHIN THE MEANING OF THE DEFINITION

Date

Record the date on which the State Supervising Ophthalmologist determined that the applicant is or is not blind within the meaning of the Act. County departments will be notified of the date of this decision by use of SDPW Form 1256 (see Chapter II, Section 1, for further detail)

By Whom

Enter name of visitor recording the verification.

Source and Location of Source

Indicate whether the applicant is or is not blind within the meaning of the Act. Refer to the date of the decision of the State Supervising Ophthalmologist as recorded on SDPW Form 1256.

and/or B. IS APPROVED FOR EYE TREATMENT

Instructions for filling out this portion of the form are identical with those for item 8A above.

Item 9. LOST EYESIGHT WHILE A RESIDENT OF THIS STATE

(It is not necessary to complete this verification unless the applicant has failed to fulfill the residence requirements specified in Item 3, State Residence).

Date

Record the date on which verification of the above requirement is completed.

By Whom

Enter name of visitor completing the verification.

Source and Location of Source

a. Indicate the date on which the person attained the degree of blindness specified in the Welfare Act. Give name and mailing address of doctor responsible for the examination and refer to his written verification of the facts which will be filed in the case record.

b. If residence in the state on the date indicated above was verified by documentary evidence, sufficient information should be included here concerning the nature and whereabouts of such evidence, so that there will be no difficulty in locating it at some future time, should it be necessary. When residence has been verified by the use of an affidavit, reference should be made to the affidavit or affidavits which may be found in the case record. Include for the purpose of identifying the proper affidavit, the name of the person making it, the date signed, and the date of approval of use of the affidavit by the district representative.

Item 10. IS NOT SOLICITING ALMS

Date

Record the date on which verification of the above requirement is completed.

By Whom

Name of visitor completing the verification.

Source and Location of Source

Refer to that part of the narrative record by date or topical heading which sets out the facts responsible for the conclusion of the visitor that the applicant is not soliciting alms.

Item 11. COMMENTS

Space is provided here for any additional comments that need to be made to clarify or amplify information recorded elsewhere on the form.

Under this heading should be recordod the reason for rejection in those situations in which an individual meets the eligibility requirements as to the degree of blindness, residence, citizenship and need but refuses to accept eye treatment as recommended by the examining physician or state supervising ophthalmologist.

Name of Visitor

The name of the visitor responsible for recording the additional comments should be entered here.

Prescribed by State Department of Public Welfare

DPW Form 58

Name of Applicant _____

Application No. ____ - ____ - _____
Type Code Serial

AGE AFFIDAVIT*

STATE OF INDIANA)
) SS:
COUNTY OF)

_____ being first sworn on oath deposes and says as follows:

1. That he is _____ years of age.

2. That he has known _____ (Applicant) who resides at _____, for _____ years.

3. That he is ___ related to _____ (Applicant). Such relationship, if any, is in the degree of _____.

4. That to his/her certain knowledge _____ (Applicant) is _____ years of age or over.

5. Deponent bases his/her knowledge of age of _____ (Applicant) on the following facts or occurrences: (Explain in detail.)

Signed: _____

Subscribed and sworn to before me this ____ day of _____, 194___.

SEAL

_____
Signature of officer or person administering oath.

My commission expires _____
My authorization expires _____

Oath may be taken by a Notary Public, or Public Official authorized to take oaths or it may be taken by an employee of the State or County Welfare Department who has been authorized to take oaths without charge.

*This affidavit is acceptable only upon the written consent, as provided below, in each case of the director or case work supervisor of the County Department of Public Welfare with which the application has been filed, after sources tried for the verification of age have been checked on the reverse side of this form.

Use approved by _____ (Director or Case Work Supervisor of _____ County Department of Public Welfare) Date _____, 194___.

SOURCES TRIED FOR VERIFICATION OF AGE

Old Age and Blind Assistance

Check 1. Primary

- [ ] Birth certificates of applicants
- [ ] Birth certificates of children of applicants
- [ ] Verified ages of children when these are sufficiently advanced
- [ ] Parish records - baptismal certificates
- [ ] Poll tax records before 1887
- [ ] Written evidence of Old Age and Survivors Insurance Benefits (Applicable only for Old Age Assistance cases)

2. Secondary

- [ ] Bible records
- [ ] Slave Bible
- [ ] Genealogies
- [ ] Samplers
- [ ] Family pictures with dates and ages
- [ ] School records
- [ ] National census records
- [ ] Special registration records for the years 1912, 1919, 1924, and 1925
- [ ] Records of Women's Council of National Defense.

The records listed below should be used only if they were made at least five years prior to application.

- [ ] Insurance policies
- [ ] Civil and military service records
- [ ] Employment records
- [ ] Passports
- [ ] Naturalization papers
- [ ] Records of Trade Unions
- [ ] Records of Fraternal Societies
- [ ] D.A.R. records
- [ ] Medical records
- [ ] Vaccination Certificates
- [ ] Marriage certificates
- [ ] Local Census Records
- [ ] Savings Bank Records
- [ ] Personal Assessment Records
- [ ] Hunting and Fishing Licenses
- [ ] Driver's license records
- [ ] Records of welfare agencies
- [ ] Newspaper Clippings
- [ ] Permanent Voting Registration

Assistance to Dependent Children

1. Primary

- [ ] Birth Certificates
- [ ] Baptismal Certificates

2. Secondary

- [ ] School Records
- [ ] Parish Records
- [ ] Insurance Policies
- [ ] Records of Welfare Agencies

All sources tried for verification of age have been checked as indicated above. The sources used have not proved definitely that the applicant fails to meet the age requirement.

Signature of Visitor _____ Date _____, 194___.

Prescribed by State Department of Public Welfare

DPW Form 59

Name of Applicant _____

Application No. ____ - ____ - ____
Type Code Serial

RESIDENCE AFFIDAVIT*

STATE OF INDIANA)
) SS:
COUNTY OF)

_____ being first sworn on oath deposes and says as follows:

1. That he has known _____ (Applicant) for a period of _____ years.
2. That to his personal knowledge _____ (Applicant) has resided at the following addresses for the times stated:

_____
Complete Address Dates: From _____ to _____

_____
Complete Address Dates: From _____ to _____

3. That the deponent became possessed of this knowledge in the following manner: (Explain in detail.)

Signed: _____

Subscribed and sworn to before me this ____ day of _____, 194____.

SEAL

_____
Signature of officer or person administering oath.

My commission expires _____
My authorization expires _____

Oath may be taken by a Notary Public, or Public Official authorized to take oaths or it may be taken by an employee of the State or County Welfare Department who has been authorized to take oaths without charge.

*This affidavit is acceptable only upon the written consent as provided below in each case of the Director or Case Work Supervisor of the County DPW with which the application has been filed, after sources tried for the verification of residence have been checked on the reverse side of this form.

Use approved by _____ Date _____ 194___.
(Director or Case Work Supervisor
of _____ County Department of Public Welfare)

SOURCES TRIED FOR VERIFICATION OF RESIDENCE

Old Age and Blind Assistance

Check 1. Primary

- ☐ Landlords' Records
- ☐ Rent Receipts
- ☐ Employment Records
- ☐ Relief Agency Records
- ☐ Merchants Records
- ☐ Utility Records
- ☐ Post Office Records
- ☐ Route Book of Rural Route Postman
- ☐ Newspaper Records

2. Secondary

- ☐ City Directory
- ☐ County Directory
- ☐ Fraternal Society Records
- ☐ Trade Union Records
- ☐ Permanent Registration Records
- ☐ Personal Assessment Records
- ☐ Automobile License Records
- ☐ Medical Records
- ☐ Postmarked envelopes or old letters
- ☐ Church Records

Assistance to Dependent Children

Check 1. Primary

- ☐ School records
- ☐ Church records of child
- ☐ Landlords' records
- ☐ Rent receipts
- ☐ Employment records
- ☐ Relief agency records
- ☐ Newspaper records
- ☐ Merchants' records
- ☐ Utility records
- ☐ Post Office Records
- ☐ Route Book of Rural Route Postman

2. Secondary

- ☐ City Directory
- ☐ County Directory
- ☐ Fraternal Society Records
- ☐ Trade Union Records
- ☐ Permanent Registration Records
- ☐ Personal Assessment Records
- ☐ Automobile License Records
- ☐ Postmarked envelopes or old letters
- ☐ Medical records
- ☐ Church records of adult

All sources tried for verification of residence have been checked as indicated above. The sources used do not definitely disprove residence.

Signature of Visitor _____ Date _____

Prescribed by State Department of Public Welfare
and approved by State Board of Accounts

DPW Farm 11 (Revised)
50M-11-1-39

THE COUNTY DEPARTMENT OF PUBLIC WELFARE

of....., COUNTY

....., INDIANA

DATA FROM RESPONSIBLE RELATIVE

Date....., 19....

To..... Application.....
(Type) (Cade) Serial)

Street.....

City or Town.....

An application for assistance to..... made by
Type

.....states that you are his/her.....

What regular contribution in money or in help of other kinds, do you now make toward the support of applicant?
State Specifically

.....

.....

.....

.....

What regular contributions in money or in help of other kinds will you continue to make or make in addition toward the support of applicant?.....
State Specifically

.....

.....

.....

.....

Responsible Relative.....
Sign Here

Date.....

Laws as to your responsibility printed
on reverse side.

This report to be returned to

THE COUNTY DEPARTMENT OF PUBLIC WELFARE OF.....COUNTY

.....INDIANA

.....County Director of Public Welfare

LIABILITY FOR SUPPORT. Nothing contained in this act shall be construed to relieve any person from the liability of maintaining and supporting his parent or parents or child or spouse, as provided by the laws of this state. If at any time during the continuance of old age or blind assistance or assistance to dependent children the state or county department has reason to believe that a spouse, son or daughter or parent of a recipient is liable for the support of the recipient and is reasonably able to assist the recipient, the county department shall, after notifying such person of the amount of the assistance granted, be empowered to bring suit against such spouse, son or daughter or parent to recover the amount of the assistance paid under the provisions of this act subsequent to such notice, or such part thereof as such spouse, son or daughter or parent might reasonably have paid. (Acts Special Session 1936, Chapter 3, Sec. 94.)

PARENTS—FAILURE TO SUPPORT. Hereafter, if any person being of full age and being financially able has neglected, or shall hereafter, without reasonable cause, neglect, to maintain and support his or her parent or parents, if such parent or parents be sick or not able to work and have not sufficient means or ability to maintain or support themselves, such person shall be deemed guilty of a misdemeanor and, upon conviction thereof, shall be fined in any sum not exceeding five hundred dollars ($500), to which may be added imprisonment in the county jail for a period not exceeding six (6) months. In the event that there are two (2) or more children, each such child shall contribute to the support of such dependent parent or parents, in such proportion as the judge of the court, in his discretion, may determine and order, and for failure or refusal so to do, or for disobedience to the orders of the court, each such child shall be severally liable to the penalties prescribed by this act. The proper court of the county in which the dependent parent or parents reside shall have jurisdiction of all actions prosecuted under the provisions of this act. If one (1) or more of the children who, by the provisions of this act, are liable for the support or partial support of any such parent or parents are residents of a county other than the county in which such parent or parents reside, the judge of the court having jurisdiction of the case shall apportion the amount to be contributed to the support of such parent or parents among the several children residing in the state, and shall certify his judgment to the proper court of each county in which any of such children reside, and the judge of the court to whom such judgment shall have been certified shall possess the same authority to enforce such judgment as he would have had if the action had accrued and if the judgment had been given in his own jurisdiction. The provisions of this act shall not apply to children who have not lived with or who have not been supported by their parents when such children were minors. (Burns 1933, 10-1410; Acts 1921, Ch. 31, pp. 1, p. 90; 1923, Ch. 15, pp. 1, p. 53.)

WIFE AND CHILDREN—FAILURE TO PROVIDE FOR. Every husband who neglects to support his wife and provide her with necessary food, clothing and medical attention, and every person having any boy under the age of sixteen (16) years or any girl under the age of seventeen (17) years depending upon him or her for education or support who wilfully neglects to furnish necessary food, clothing, shelter and medical attention for his or her child or children, ward or wards, shall be deemed guilty of a misdemeanor, and, on conviction thereof, shall be fined any sum not exceeding five hundred dollars ($500); to which may be added imprisonment in the county jail or workhouse for a period not exceeding six (6) months. (Burns 10-1405, Acts 1915, Ch. 73, pp. 1, p. 139.)

FORM PRESCRIBED BY STATE DEPARTMENT OF PUBLIC WELFARE
AND STATE BOARD OF ACCOUNTS

DPW FORM 14
6-1-38

THE COUNTY DEPARTMENT OF PUBLIC WELFARE

OF..... ..... .COUNTY

.....INDIANA

APPLICATION NO..... -.....-.....
(TYPE) (CODE) (SERIAL)

BANK CLEARANCE

DATE.....

TO WHOM IT MAY CONCERN:

I, THE UNDERSIGNED, HEREBY AUTHORIZE AND REQUEST YOU TO GIVE REPRESENTATIVES OF THE DEPARTMENT OF PUBLIC WELFARE OF.....COUNTY ANY INFORMATION THAT THEY MAY DESIRE CONCERNING MY FINANCES WITHOUT ANY LIABILITY TO YOU WHATSOEVER.

SIGNED..... ADDRESS.....

SIGNED..... ADDRESS.....

TO:.....

.....

THE ABOVE PERSON OR PERSONS HAVE APPLIED TO THIS DEPARTMENT FOR ASSISTANCE AND, BY ABOVE SIGNATURES, HAVE GIVEN US PERMISSION TO MAKE THE NECESSARY FINANCIAL INVESTIGATION.

MAY WE HAVE THE FOLLOWING INFORMATION:

AMOUNT OF PRESENT ACCOUNT $.....

DATES AND AMOUNTS OF RECENT DEPOSITS ..... $.....

..... $.....

DATES AND AMOUNTS OF RECENT WITHDRAWALS ..... $.....

..... $.....

IS THERE A RESTRICTED ACCOUNT.....AMOUNT $.....

IS THERE POSSIBILITY OF OBTAINING ALL OR PART.....APPROXIMATE DATE.....

IS THERE A SAFETY DEPOSIT BOX.....

DESCRIPTION AND AMOUNT OF ANY DEBTS OR LIABILITIES.....

....

.....
COUNTY DEPARTMENT OF PUBLIC WELFARE REPRESENTATIVE

BANK PLEASE SIGN OR STAMP HERE

..... DATE.....

INSTRUCTIONS: PREPARE IN DUPLICATE. DELIVER BOTH COPIES TO BANK. BANK WILL RETAIN ONE COPY AND RETURN OTHER COPY TO COUNTY DEPARTMENT OF PUBLIC WELFARE.

P-2703-6-7-38

Form Prescribed by the State
Department of Public Welfare
and Approved by State Board
of Accounts

DPW Form 71
(Revised)

The County Department of Public Welfare

of _____ County

_____ Indiana

Date _____, 19__

To: _____ Hospital

Name of Patient _____ Age _____ Sex _____ Color _____

Other Names Used _____ Case No. _____
(Type) (Code) (Serial)

Address _____
(Street or Rural Route) (Post Office)

The above named person was admitted to _____ Hospital on _____ from _____ County. Application on DPW Form No. _____ for _____ assistance was accepted _____ for this person. DPW Form No. ____ includes a statement of the applicant taken under oath, authorizing physicians, relatives and others to give information to those authorized by law who may request information concerning the applicant or his circumstances.
(Type) (Date)

Will you kindly furnish the following information for official use: (State specifically what information you desire.)

_____

_____

_____

_____

_____

_____

_____

Sincerely yours,

_____
County Director of Public Welfare

Prescribed by State Board of Public Welfare and Approved by Unemployment Compensation Division of Indiana

DPW Form 95

REQUEST FOR STATEMENT FROM DEPUTY OF UNEMPLOYMENT COMPENSATION DIVISION

To the Unemployment Compensation Division

Department of Treasury

State of Indiana

You are hereby requested to advise _____ (Name of County Director), Director of the Department of Public Welfare of _____ County at _____, Indiana, of my status with reference to my eligibility for Unemployment Compensation Benefits.

_____
Signature

_____ _____
Social Security Number Address

To be filed by the County Department or individual with the Unemployment Compensation Division's Deputy at the proper office of the State Employment Service.

To be filled out and mailed to the County Department of Public Welfare office making the request.

STATEMENT

1. Applicant rejected due to ineligibility _____ 19 ( )
2. Application received _____ 19 ( )
   - (a) In waiting period ( )
   - (b) Is receiving benefits ( )
     1. Date first payment received _____, 19___
     2. Total benefit amount $ _____
     3. Weekly benefit amount $ _____
   - (c) Benefits exhausted ( )
   - (d) Temporarily ineligible for ___ weeks from this date ( )
   - (e) Other _____ ( )

Dated this _____ day of _____, 19___.

UNEMPLOYMENT COMPENSATION DIVISION

_____
Deputy

_____
Local Office

Prepare in Duplicate
1. Unemployment Compensation Division ☐
2. County Department of Public Welfare ☐

P-2833-8-1-38

ED BY STATE DEPARTMENT OF PUBLIC
AND STATE BOARD OF ACCOUNTS

DPW FORM 5
(REVISED)
75M—9-1-38

COUNTY DEPARTMENT OF PUBLIC WELFARE OF _____ COUNTY

STATEMENT OF VERIFICATIONS

_____ APPLICATION NUMBER _____
TYPE CODE SERIAL

SS _____

CONDITIONS OF ELIGIBILITY	DATE AND BY WHOM	HOW VERIFIED SOURCE AND LOCATION OF SOURCE
FILLS AGE REQUIREMENT		
CITIZEN OF THE U. S.		
E RESIDENCE AS BEEN A RESIDENT OF THE STATE FOR A ERIOD OF AT LEAST 5 YEARS DURING THE 9 EARS IMMEDIATELY PRECEDING DATE OF PPLICATION.		
ESIDENCE IN STATE FOR THE YEAR IMME-IATELY PRECEDING DATE OF APPLICATION AS BEEN CONTINUOUS.		
NTY RESIDENCE _____ COUNTY IS LAST OUNTY IN WHICH APPLICANT HAS RESIDED ONTINUOUSLY FOR 1 YEAR OUT OF LAST 9 EARS PRIOR TO DATE OF APPLICATION.		
_____ COUNTY IS LAST OUNTY OF THE STATE IN WHICH APPLICANT AS RESIDED CONTINUOUSLY FOR 1 YEAR RIOR TO ENTERING A PRIVATE INSTITUTION. APPLIES ONLY TO ELIGIBILITY FOR ASSIST-NCE TO THE AGED.)		
IAS NOT RESIDED CONTINUOUSLY IN ANY 1 COUNTY OF THE STATE FOR A PERIOD OF YEAR OUT OF LAST 9 YEARS PRIOR TO DATE OF APPLICATION.		
INSUFFICIENT INCOME OR RESOURCES.		
NOT ASSIGNED OR TRANSFERRED PROPERTY WITHIN THE LAST 5 YEARS IN ORDER TO QUALIFY FOR ASSISTANCE.		
OT AN INMATE OF A PUBLIC INSTITUTION.		

APPLIES ONLY TO ELIGIBILITY FOR ASSISTANCE TO THE BLIND.

CONDITIONS OF ELIGIBILITY	DATE AND BY WHOM	HOW VERIFIED SOURCE AND LOCATION OF SOURCE
8. (A) IS BLIND WITHIN THE MEANING OF THE DEFINITION.		
_____ AND/OR _____		
(B) IS APPROVED FOR EYE TREATMENT.		
9. LOST EYESIGHT WHILE A RESIDENT OF THIS STATE.		
10. IS NOT SOLICITING ALMS.		

1. COMMENTS:

NAME OF VISITOR _____

SECTION 5

STANDARD RESOURCE ALLOWANCE

I. ESTABLISHMENT

A standard resource allowance is to be recommended and submitted for approval to the state department by each county department to be used in determining the amount of intangible personal property equity which an applicant or recipient shall be allowed to retain without rendering him ineligible for blind assistance on the basis of need. Intangible personal property under the provisions of Regulation 2-214 (Revised) is defined as cash, securities, and the cash surrender value of life insurance.

Each county department shall recommend such an allowance which shall not be less than $150.00 nor more than $250.00. The amount recommended in each county shall be submitted for approval to the state department of public welfare by letter.

II. APPLICATION

A. To Cash and Securities (For additional information regarding cash and securities, see Old Age Assistance Manual, Chapter II, Section 4, Pages 23 - 26, Items C and D.)

Whenever the intangible personal property of an applicant or recipient is in the form of cash or securities and is found to have a cash value which exceeds the standard resource allowance, the amount in excess of the standard resource allowance must be utilized before he may obtain or continue to receive assistance. However, possession of cash or securities with a cash value no greater than the standard resource allowance shall not of itself render an applicant or recipient ineligible with the possible exceptions described under item C.

B. To Life Insurance (For additional information regarding insurance, see Old Age Assistance Manual, Chapter II, Section 4, Pages 26 - 41, Item E, Paragraphs 1 - 4, inclusive.)

The cash surrender value of the applicant's or recipient's equity in life insurance is the basis for applying the standard resource allowance in all cases involving life insurance. Thus, the possession of life insurance that has no cash surrender value, or that has a cash surrender value in which the applicant's or recipient's equity is no greater than the standard resource allowance shall not render the individual ineligible with the possible exceptions described under item C. Because of the fact that it may be inadvisable to require the cash surrendering of insurance carried on the life of a person whose life expectancy is very short due to a serious health factor

and because of the problems arising by virtue of the fact that the cash surrender value of life insurance increases through continuance of insurance payments, a leeway of $25.00 in excess of the standard resource allowance will be permissable. In other words, the cash surrender value of an applicant's life insurance may exceed the standard resource allowance by not more than $25.00 without rendering him ineligible on the basis of need. However, if the applicant's or recipient's equity in life insurance has a cash surrender value in excess of the standard resource allowance by more than $25.00, he shall be ineligible until he cash surrenders the insurance and utilizes that portion of it which exceeds the standard resource allowance.

C. To Combined Cash, Securities, and Life Insurance

Sometimes applicants or recipients may have resources in the combination of cash, securities, and life insurance. Where this is the case, the cash value of the individual's equity in all three must be considered together and if this exceeds the standard resource allowance, that portion in excess must be utilized before the individual receives or continues to receive assistance. The type of adjustment to be made of the resources should generally be left to the discretion of the owner. In some instances, however, the applicant or recipient may call upon the county department for advice and help in making the necessary adjustment and such help as may be given would logically fall within the area of service which a county department may render.

III. RETROACTIVE NATURE

If the amount of the Standard Resource Allowance is reduced, this action will be retroactive with respect to cash and securities which the recipient has been permitted to retain. Such action will not be retroactive with respect to insurance alone unless the cash surrender value of the insurance is in excess of the amount of the Standard Resource Allowance as revised.

SECTION 6

ESTABLISHMENT OF BUDGET ESTIMATES, BUDGET GUIDE, AND INDIVIDUAL BUDGETS FOR BLIND ASSISTANCE.

I. GENERAL COMMENTS.

A budget is a device for estimating the needs of a family and the amount of assistance necessary to meet those needs. If it is soundly planned and wisely utilized, it can be of great help both to the agency administering public assistance, and to the families receiving assistance. For the agency it offers a flexible yet objective standard in determining whether the families' resources are adequate to maintain health and provide wholesome living conditions, and if their resources are inadequate, it affords a practical guage in estimating the amount of assistance to be granted. For families and individuals who ask advice, and many do, on how to make the most of their assistance payments, it provides information on which to make practical recommendations suited to the particular situation.

In the assistance program established in Indiana under the Social Security Act, the determination of need and the guidance of families and individuals receiving assistance are among the responsibilities of county departments. In both of these aspects of its work, the county department will find the budgetary approach sound, practical and effective. Administration of assistance to the blind, to the aged, and to dependent children, should be based on sound social planning and sound budgeting. Individuals in all three of these groups are in need not because of a temporary situation, like the acute illness or unemployment of a wage earner, but because of relatively permanent inability to support themselves. Among the blind and the aged, and particularly among children, inadequate physical care is likely to cause irreparable injuries to health. Most of those individuals are members of families with needs which must be considered on a family rather than on an individual basis. Under such circumstances, sporadic, or inadequate, or poorly planned assistance will not only be disastrous to personal and social values, but will also be uneconomical -- expensive in medical care, in possible institutionalization and, in the case of children, in the potential threat of delinquency.

The state department of public welfare has as one of its functions the establishment of standard processes by which assistance allowances can be established; for if there is to be a basic uniformity in the assistance allowance, the process or method of establishing allowances must be uniform.

The Welfare Act of 1936 definitely contemplates that the amount of assistance granted in each of the three categories of public assistance shall be sufficient in amount, when added to other resources available to the applicant or recipient, to enable him to secure a reasonable subsistence compatible with decency and health. The assistance granted is to be based upon the needs of the individual in excess of his income and present resources and in accordance with the rules and regulations of the state department.

Three major steps are involved in the total budget process and this chapter of the manual is intended to describe and amplify each of the three phases. The first of these is the establishment of Budget Estimates; the second, the formulation of the Budget Guide; and the third, the determination of the individual budget of the applicant or recipient of assistance.

The Budget Estimates, DPW Form 19, are really work sheets on which the county department will record the prices of commodities included in the particular budget items being studied, preparatory to the formulation of the Budget Guide, DPW Form 49 (Revised). (The Budget Guide, DPW Form 49 (Revised), takes the place of the former Standard Budget, DPW Form 49, and is to be used by county departments as a guide in establishing the amount of assistance to recommend for each individual applicant or recipient.) Individual budgets are to be worked out on each case, using the Budget Guide as a basis and should be carefully figured in accordance with the procedure outlined herein for each eligible applicant before assistance is recommended and for each recipient of assistance when there has been a change either in his needs or his resources. DPW Form 5A (Revised), Budget and Recommendation Form, is to be used for figuring individual budgets and should be incorporated in the individual case record.

II. BUDGET ESTIMATES

A. RESPONSIBILITY FOR PREPARATION OF BUDGET ESTIMATES

The county board of public welfare and the county director have the primary responsibility for the preparation of the budget estimates. This responsibility may be shared, however, in a number of ways, according to the decision of individual county departments. The information needed to complete the budget estimates may be assembled by members of the county board, by the director, by county department staff members or by lay committees according to the judgment and decision of the county board.

The preparation of the budget estimate is a cooperative enterprise - an enterprise that calls for planning on the part of the staff, the board, and the community. It is important that every effort be made to enable the community to understand the items and the purpose and method of preparation of the budget estimates. Some county departments will, therefore, solicit the assistance of many capable people in the community by appointing special committees to study needs and suggest policies in regard to various aspects of the problems of public welfare. Such a committee might be of assistance in connection with the formulation of the budget estimates, studying such matters as housing, clothing, recreation, medical needs, etc., if the board so desires .

In suggesting membership on one of these committees it would seem wise to have the county director serve as secretary to all committees. The other sub-committee members may be representative citizens, home economists from the local schools, colleges and industrial plants, home

demonstration agents, medical representatives, nurses, merchants, real estate dealers, representatives of other social agencies, and others. The value of these groups will depend upon the methods used in their direction by the director and the board. These committees should be temporary and advisory in nature, and the objectives of the committees should be clearly defined for the members. They may be dissolved after the particular assignment is completed and recalled when needed. The district representative of the state department may be consulted regarding the use and the appointment of such committees.

B. INSTRUCTIONS FOR PREPARATION OF BUDGET ESTIMATES

The first step in determining an assistance allowance is to establish the items which are normally a part of an individual budget. Those items in the normal budget for independent individuals estimated upon an average adequate basis is the basic guide. The items of the normal budget are to be discussed as follows: food, clothing, shelter, fuel, utilities, household operations, health, insurance, personal care, miscellaneous expense. Suggestions for working out all budget items to be considered in blind assistance are included in this chapter of the manual.

In accordance with state department regulation 2-302, each county department is to make and forward to the division of public assistance of the state department budget estimates for blind persons on DPW Form 19, Budget Estimates, in accordance with procedures established by the division of public assistance of the state department. The procedures for the establishment of the budget estimates are outlined below. When the county department has completed the budget estimates, one copy of all budget estimate schedules should be sent to the division of public assistance together with two copies of the Budget Guide, DPW Form 49 (Revised), as recommended by the county department.

1. Food

a. General Statement

In planning a food budget, the allowance should be large enough to provide a diet adequate to maintain health and growth, to provide for an ample margin of safety in all dietary essentials, and to allow for a reasonable variety in the selection of foods. To provide adequate nutrition, the diet for an individual must furnish enough carbohydrates, fats, and protein foods to yield the standard energy needs of the various recipients of public assistance. In the interest of economy these energy foods must be the carriers of the other dietary essentials.

The Bureau of Home Economics of the Department of Agriculture has constructed a number of standard food budgets in accordance with the portion of the income of an individual which can be

used for food. The lowest possible type of budget is the emergency restricted diet budget. A healthy individual cannot live on such a food budget permanently without suffering some ill effects because of its inadequacy. The next level is the minimum cost adequate diet. This diet will maintain a person in health permanently but allows for little variation and is constructed on the assumption of expert buying and planning of balanced meals. The first question to decide is whether the assistance program budget should be of the emergency restricted diet type or the adequate diet type. It has been pointed out that the former does not furnish an adequate diet over a prolonged period. Since the restricted diet type of budget is not constructed so as to give a continuing degree of adequacy, it is obviously of too low a standard to be accepted for public assistance use. Therefore, the food budget suggested by the state department as a minimum standard is the minimum cost adequate diet type. The foods and their amounts going to make up this type of diet budget are included on DPW Form 19, Schedule A (Revised). (Sample forms at end of Chapter II, Section 6).

b. Directions for Filling Schedule A (Revised) - Food Prices

It is to be noted that Schedule A (Revised) is not identical with Schedule A used in connection with the establishment of the budget estimates in determining the old age assistance budget guide. Certain changes have been made in the items and quantities listed, but study has indicated that the total monetary value is not effected by these changes. In preparing Schedule A (Revised), county departments may consider one of two methods for obtaining the total monthly cost of food for one adult. The total monthly cost of the items on the budget estimate for food, as established in the revised Old Age Assistance Manual, may be used without filling out the cost of each specific item, or the separate items on Schedule A (Revised) may be computed and submitted to the division of public assistance on Schedule A (Revised), as directed below. In the first instance Schedule A (Revised) would be submitted to the division of public assistance blank in all respects except the amount of the total monthly cost. In the second instance, the form would be completely filled out for all items of the budget and the total monthly cost before being submitted to the division of public assistance. If any county department desires to recompute any or all of the items on Schedule A (Revised), at least three stores should be visited and the unit price of the several articles listed on the schedule secured. It must be remembered that most public assistance recipients will not have sufficient capital to buy so as to take advantage of quantity purchases. For example, the per pound price of sugar

if bought in 100 pound lots should not be included. The price which the grocer would charge if only one pound were bought is the price which should be entered. This same point must be borne in mind when securing the prices of fresh fruits, fresh vegetables, and dried beans, particularly. The unit of measure of each item is indicated in column No. 2 on the schedule.

Most of the items on the schedule are measured for this purpose in units of one pound. Some of these items are not ordinarily sold by the pound in some stores in which case it should be determined from the package or the way the item is sold what the pound price is. For example, if carrots are sold at 5¢ per bunch, select an average bunch and weigh it and thus determine what a pound of carrots costs. Flour is seldom sold in packages of less than 5 pounds. The per pound price of flour then, is one-fifth of the price of a five pound bag. In most cases, a true picture of flour prices is not secured if the price per pound is judged on the price of a 24 pound bag. The weight of canned goods is indicated on the label. Since many cuts of meat also contain bone, a 20% increase should be made in the quantity of such cuts to indicate a true figure for lean meat. Reduce all prices to the unit price expressed in column No. 2.

The food schedule contains columns for the prices available in four different stores. Three is the minimum number of stores from which prices should be secured in any county. In counties with a number of communities, it would be well to visit stores in each community before determining a county average. In selecting the stores to be visited, care should be taken that they are representative; for instance, one chain store, one small independent store selling for cash, one small independent store extending credit, and one store representing special racial groups, if there are any in the community. Attempts should be made to secure food prices from those stores with which the majority of the recipients do business.

When the prices from the three or more stores are secured, the individual prices should be averaged. Thus, in column 7, opposite corn meal should be entered the average price of corn meal as shown by the three or more stores visited.

Column 8 equals the average of the item averages shown in column 7. For example, under the group meat and fish, the items averaged in column 7 should be totalled and divided by the number of items where prices are obtained. The resulting average should be entered in column 8 opposite the group title of meat and fish.

Column 9 contains the quantity of each food group needed to furnish one adult individual a minimum cost adequate diet for a period of one month. The next step is to multiply the group price in column 8 by the quantity shown in column 9.

The results of multiplying column 8 by column 9 should be entered in column 10. The sum of the amounts in column 10 is the monetary cost of a minimum cost adequate diet for one adult individual in the county.

2. Clothing (Including Personal Upkeep)

a. General Statement

The adoption of a policy of clothing allowances must be based upon suggestions of authorities who have studies clothing needs. A number of social agencies with the aid of the U.S.D.A. Bureau of Home Economics and the departments of home economics of several of the land-grant colleges have developed after extensive research, tables showing the minimum amount of clothing needed for various ages and for each sex.

This schedule of minimum clothing items, based on length of time worn, was worked out by sex and age groups and comprises Schedules B5 and B6 - Clothing Price List. It has been worked out on the assumption that the applicant's present stock of clothing is adequate. Schedules B5 and B6, therefore, give the minimum replacements needed to maintain a clothing supply.

Personal upkeep may be defined as articles for the personal care of the body, such as toothpaste, tooth brushes, comb, hair brush, hair cuts, shaving, laundry, and repair of clothing

b. Directions for Filling out Schedules B5 and B6 - Clothing Prices for Adult Man and Adult Woman

The same general procedure is to be followed in filling out Schedules B5 and B6 as was followed in connection with Schedule A (Revised). Prices are to be secured from at least three representative stores for each item listed. In some counties it may be desirable to secure prices from more stores. If this is done, several copies of the schedules may be used.

As soon as the prices are secured, the average price per item is to be determined and entered in column 5. The annual cost, column 8, is then determined by multiplying the figure in column 5 by that in column 6, and dividing this last number by the figure in column 7. The sum of the amounts in column 8 will equal the annual clothing cost for each type of individual. The monthly cost may be determined by dividing the annual cost by twelve.

3. Other Budget Items

a. General Statement

Several of the items making up the budget of an individual do not lend themselves to the exact measurement possible with the food and clothing items which have just been discussed. Their importance, however, is none the less. Each one of the following items should be carefully considered so that the needs of blind assistance recipients will be adequately met.

(1) Shelter

(a) General Statement

Shelter, whether it be owned or rented, should meet the needs of health and the standards of decency of the locality. Provisions should be made for adequacy of space, a safe water supply, sanitary toilet facilities and screens, if needed.

The size of the house should be such that there will not be overcrowding, especially of bedrooms. Storage space for canned foods and household equipment is desirable.

(b) Directions for Filling out Schedule C - Rent Costs

Schedule C has been prepared to enable counties to secure more accurate data on rental situations. The average monthly rent prevailing throughout the county should be determined for each size and type of house available in the county ordinarily occupied by persons with limited incomes. These averages should be entered on Schedule C in their proper columns. It will be noticed that six different kinds of houses are listed according to their location and condition. In the "urban" column should be included the average rent for the different sizes of houses in communities of 2,500 inhabitants and more. "Suburban" homes shall be considered to include those houses located in the suburban areas of urban cities. In this category should also be considered villages and towns with populations of from 250 to 2,500. Rural houses shall be considered as those located in villages of less than 250 inhabitants and in the open country. The county department will want to obtain the rentals for several districts of large cities where the majority of the public assistance clients live. The counties should consult all possible sources for information.

(2) Fuel

(a) General Statement

The item of fuel will vary considerably among the several counties, because of the general type of fuel used in each particular locality and the counties' proximity to its fuel source. In many counties several types of fuel will be available for use. Where this situation is true the counties will want to establish monetary allowances for each type of fuel.

(b) Directions for Filling out Schedule D - Fuel Price List

The county department should follow the procedure outlined for Schedules A (Revised), B5 and B6 in securing prices from representative dealers. Prices are to be given by the unit indicated. At least three dealers should be requested to give prices; more should be used if three do not give a representative picture of conditions in the county. As soon as the prices are secured, the average for each type of fuel should be computed. Coal should be a good grade of Indiana soft lump. The average consumption in a one to four room house can then be determined on an annual basis and on a monthly basis.

(3) Utilities

(a) General Statement

The items of utilities like fuel will depend on the types of utilities in use in the county. Often there are several different utility companies in one county. This should be taken into consideration in obtaining price estimates. As a general rule the allowance should not be less than the minimum which is charged by the utility company for service.

(b) Directions for Filling Out Schedule E - Cost of Utilities

On this schedule may be entered the minimum rates which prevail in the county for the several utilities listed. There are spaces for the rates in five different rate areas and for three utilities. If there are more areas, as many copies of the schedule should be used as are needed to record the minimum rate of each area.

After the several minimum rates are collected, the average minimum rate prevailing in the county for each type

(c) [illegible]

(d) [illegible]

[illegible]

[illegible]

utility should be computed. From the average minimums of the several utilities listed, an average total utilities cost can be established by adding the averages of the utilities used by the recipients of public assistance. For example: if water's average is 50¢, electricity's is $1.00, and gas's is 75¢, the county standard for utilities is the sum of the three or $2.25. (If all utilities are not available in any rate area, the blank spaces in the schedule should be filled by a dash).

(4) Household Operating

An allowance should be made in the budget for the operation of the household.

The Indianapolis Council of Social Agencies uses the following list of household articles for a family of five as a basis for determining household operating need. This list may serve as a guide to the county department in determining the amount to be included in the budget guide for this item. The rate of replacement of these items should be taken into consideration as future budgets are planned.

Nails, 1 lb. box, assorted
Tacks, 1 package
Brooms, 4 per year
Dust pan, 1 every two years
Scrubbing brush, 2
Pail, 1 every two years
Oil cloth, 4½ yards
Cooking utensils, as needed
Table accessories, dishes, spoons, etc., as needed
Clothesline, 50 feet
Washboard, 1 every three years
Boiler, 1 every two years
Light bulbs or lamp supplies, as needed
Wringer, 1 every four years
Wash tub, 1 every three years
Clothes pins, 60
Mops or mop heads, 3
Sheets, 2 per year or 10 yards of muslin
Pillow cases, 1 dozen every two years
Towels, 1 dozen
Blanket, 1
Toilet soap, washing powder, cleanser, toilet tissue and the like, as needed.

(5) Health

The allowance for health care is intended to cover only the usual household remedies. Emergency or occasional medical service cannot be measured accurately and no amount for such service should be included in the budget estimate.

The allowance for health purposes should be sufficient to provide for first-aid supplies and usual household remedies.

(6) Insurance

Generally, it is desirable when recipients of public assistance are carrying insurance, that it be not in excess of an amount sufficient for burial expenses. Insofar as practicable all policies should be put on a straight life basis.

Schedule F may be of some assistance in determining the insurance estimate.

The amount to be included in the budget estimate for insurance can be determined generally by taking the age cost classification of several insurance companies in each area (the average will be about 38 years of age) in relation to the amount of the death benefit desired. The death benefit should be the same as that recommended by the county department and adopted by the state department as the maximum to be used for burial expenses. The several age cost classifications should be averaged to determine the amount to be included in the Budget Guide.

(7) Personal Care

Some blind recipients will be in need of special care, care which can be met by providing personal services: for example, a person to help with household tasks, or to assist him in other ways in his daily life. It will be difficult to make an estimate for a personal care item but the county may want to indicate that in those cases where such services are required that the county will consider such an item in their recommendation as to the amount of assistance needed.

(8) Miscellaneous

There may be other items which county departments will feel to be a necessary part of a budget, but these items may not all fall logically in the budget outline. When they are included an explanation should be made as to what items

they cover. An amount for this item might cover the cost of newspapers, or transportation to a clinic or to church, church dues, etc. It might also include any incidental cost in connection with securing reading material for the blind and talking books. (These are items which will not be applicable in all situations, but the county department will want to indicate that in those cases where the recipient may benefit by such opportunities, they will attempt to make adequate provision for them).

III. BUDGET GUIDE

A. DEFINITION OF A BUDGET GUIDE

The Blind Assistance Budget Guide is a table showing the cost of living on a standard compatible with decency and health for one blind individual living alone, without resources.

The Budget Guide is made up from a series of averages: consequently, the total cost of living on a standard compatible with decency and health of any individual may not equal the specific needs of any particular individual.

The Budget Guide, DPW Form 49 (Revised) takes the place of the former standard budget DPW Form 49, and is to be used by the county departments as a guide in establishing the amount of assistance to be recommended for each individual applicant or recipient. In the interest of convenience and ease of application the Budget Guide has been reduced to the simplest form possible.

B. PREPARATION OF THE BUDGET GUIDE

The data needed for the preparation of a Budget Guide for blind assistance are contained on the schedules of prices as suggested in item II, Preparation of Budget Estimates.

The Budget Guide is to be prepared on DPW Form 49 (Revised), a sample of which is attached at the end of this section.

1. Food

The value of food for one blind individual is the figure shown on Schedule A (Revised) subject to any revision in accordance with rule and regulation 2-302 which provides for approval or change by the division of public assistance of the amount allowed for food. If the figure submitted on the Budget Guide is not that shown on Schedule A (Revised), the county department should submit the reasons for the difference.

2. Clothing

The value of clothing for one blind individual is obtained by taking the average of the cost of clothing for an adult man and the cost of clothing for an adult woman shown on Schedules B5 and B6, subject to any revision in accordance with rule and regulation 2-302 which provides for approval or change by the division of public assistance for the item clothing. If the figure submitted by the county department on the Budget Guide is not the average of Schedules B5 and B6 the county department should submit reasons for the difference.

3. Shelter, Fuel, Utilities, Household, Health, Insurance, Personal Care, and Miscellaneous.

In accordance with rule and regulation 2-302, county departments are urged to use the figures as established on the Budget Estimates for all items of the budget. If the amounts established on the Budget Estimate schedules are not used in computing the Budget Guide, the county department should submit the reason for the difference in writing. For the items of health, personal care, and miscellaneous, no schedules have been provided, and county departments will use the figures estimated by them for these items. Under items "miscellaneous" should be recorded the specific items for which the allowance is intended. The budgetary amounts submitted on the Budget Guide will then be reviewed for approval or change by the division of public assistance, and county departments will be advised of the Budget Guide as adopted.

C. SUBMISSION TO THE DIVISION OF PUBLIC ASSISTANCE

The Budget Guide, DPW Form 49 (Revised) should be completed immediately following the compilation of the Budget Estimates. Two copies of the completed Budget Guide, DPW Form 49 (Revised) should be attached to the Budget Estimate Schedules and forwarded to the division of public assistance for approval or change prior to use by the county departments.

D. FUTURE REVISIONS

As a general principle it may be stated that the Budget Guide should be recomputed as often as it is felt necessary to insure that the amounts allowed are adequate to furnish a subsistence compatible with decency and health. The length of the period between revisions will vary with the rapidity of changes in the commodity markets. The amount to be allowed for food should be computed at least every six months and the amount to be allowed for clothing should be computed every six months, unless the state department requests that it be done more often. Each time the food and clothing items of the Budget Guide are computed, they should be figured in accordance with the state

department regulation 2-302 and with the procedure outlined under items II and III of this section of the manual.

IV. PREPARATION OF INDIVIDUAL BUDGETS FOR THE BLIND

A. GENERAL STATEMENT ON INDIVIDUAL BUDGETS

Public assistance, irrespective of how adequately needs are being met, can be given most economically and equitably only if it is carefully planned. The discussion of the individual's own budget in relation to the Budget Guide offers the most satisfactory means of determining need and of planning assistance payments. Working out a budget with an individual is the best way of finding out what the needs of the family are, and how these needs have been met in the past. This procedure often brings to light information about family resources that would not have been deliberately concealed, but might not have been mentioned because they are irregular or intangible. It also offers an excellent opportunity for discussing with the applicant the limitations of the state's public assistance program on an objective basis, and for suggesting to the individual the use of other community resources in attempting to meet his total needs.

Payments for assistance under the Social Security Act, must be made in cash and may not be conditional upon the use the recipient makes of the money. Many individuals with long practice of living on limited means, are equipped to make a little money go a long way.

It is in keeping with the spirit of the Social Security Act and The Welfare Act of 1936 that individuals receiving assistance should be given as much freedom as possible in the management of their own affairs. If a spirit of independence is to be conserved, it is essential that there be opportunities for self-expression and for the preservation of self respect. Cash payments at regular intervals granted so as to preserve these opportunities will enable an individual to establish for himself a status in the community that is fundamental to social security. It is intended that the Budget Guide should be used in determining the amount of assistance to grant to individual cases, not as arbitrary control on individual expenditures, but as a basis of economic planning.

In using the Budget Guide in determining the amount of assistance to recommend in any given instance, it should be remembered that the amounts contained in the Budget Guide for each budget item are not necessarily the amounts to be allowed. However, if an individual has no resources whatsoever, the needs of that individual will be equal to, or approach closely, the amounts contained in the Budget Guide. The fact that the Budget Guide has been prepared does not lessen in any respect the necessity for computing the budget for each individual applicant for public assistance, after obtaining all of the facts

available relating to his resources and his particular needs.

There are four things to consider in the determination of awards.

1. The Determination of the Applicant's Needs

To determine the applicant's monetary needs, the visitor must first determine two things; the needs of the individual in relation to a standard of living compatible with decency and health, and the income or resources which the individual has available to meet his needs. The difference between the income and actual needs of the applicant or recipient will indicate whether there is a deficit to be met through an assistance award or whether there is a surplus which will render the person ineligible.

2. The Elimination of Inadequate Awards

After the visitor has determined the applicant's budgetary need, The Welfare Act makes it the responsibility of the county department to see that awards adequate to maintain decency and health are recommended for approval by the state department.

3. The Avoidance of Excessive Awards

Likewise under The Act it is the responsibility of the county department after the determination of the need to avoid recommending grants in excessive amounts in relation to the need of the applicant for approval of the state department.

4. The Uniform Treatment of All Recipients Similarly Situated

The visitor must always attempt to be impartial and objective in recommending budgetary allowances so that uniform treatment of all recipients is realized. Individual differences do exist and necessitate differing amounts of assistance. If the county department is objective in the analysis of needs of recipients allowing the need factor to be the determining factor rather than personal prejudices, there should be equality in the consideration of recipients' needs. In estimating the need and the income, total need and total income should be determined, even though maximum grants under The Act prevent an award equal to the budgetary deficiency.

B. USE OF BUDGET GUIDE, DPW FORM 49 (REVISED), IN ESTABLISHING NEED OF APPLICANT OR RECIPIENT OF BLIND ASSISTANCE

1. General Statement

Each visitor should thoroughly understand the entire budget pro-

cess from the formulation of the Budget Estimates and the Budget Guide to the preparation of the individual budget. In order to have a full understanding and appreciation of the needs of the individual applicant it is necessary to understand and appreciate the living standards of blind persons and the factors which go to make up such living standards as compiled in the Budget Estimates.

The Budget Guide as prepared by the county department is an approximation of the amount of money needed by a blind person living alone without resources, and should not be interpreted as a measure for the maximum or minimum amount to be granted for each item in the individual budget.

In most instances, the amount for each item on the Budget Guide should be allowed in the individual budget of the applicant. Exceptions exist where investigation shows that he requires no money for the purchase of a particular item because he receives it in kind from some source; or where he has a verified need in excess of the item amount given on the Budget Guide; or where he has no need for a particular item on the Budget Guide. When a deviation either as an excess amount or a deduction from the specific items of the Budget Guide is made to meet the individual situation of the applicant, an adequate explanation **must** be made of the reason for such deviation. If the deviation is the result of assistance in kind received by the applicant, such fact may be apparent on the individual budget DPW Form 5A (Revised). However, particular situations should be noted and where an adequate explanation cannot be made on the budget form, reference should be made to it in the narrative record. (See Chapter II Section 7 on narrative recording).

Suggestions as to factors that should be considered in establishing the amount to recommend for each item of the individual budget are as follows:

2. Specific Items

a. Food

Oftentimes the special needs of an individual applicant for food will exceed or be less than the amount established in the Budget Guide because of the special situation of the blind person. In the process of investigation, the visitor may learn that the blind individual has a health problem which requires a food allowance in excess of the amount allowed in the county Budget Guide. After verifying this fact with the doctor, clinic, or county nurse, the visitor will then wish to plan for this individual a sufficient food allowance to meet the special diet prescribed by the medical authority.

Some applicants will have made plans for board in the place where they are living or elsewhere and this fact should be taken into consideration in determining the food item which might in some instances exceed that of the Budget Guide.

In another instance, the applicant may be able to meet some of his food needs through farm produce or contributions of food commodities given regularly by relatives or friends. For such an applicant, the visitor will want to make a deduction from the amount allowed for food in the Budget Guide and allow only enough to meet the deficiency between the assistance in kind and the Budget Guide allowance. Such deduction should be made only when it has been verified that assistance in kind is received regularly and will continue. The Budget Estimate DPW Form 19, Schedule A (Revised), Food, established by the county department may be helpful in evaluating the monetary value of assistance in kind such as the value of farm produce in eggs, milk, and vegetables. Such amount could then be deducted from the amount listed for food on the Budget Guide.

b. Clothing

Where the individual applicant already has a supply of clothing, the amount allowed him will be computed with the thought in mind that the allowance is to maintain the clothing supply and not to replenish it. In some instances, therefore, an increased amount may be required until the supply is made adequate. Many applicants will have relatives who can provide at least a part of the clothing needs for the applicant. However, the relative may not be able to provide all the clothing needed, and the applicant should have an allowance in his individual budget to meet his actual need. Again, as in the amount allowed for food, where a deduction is made for assistance in kind, provided regularly, the amount allowed in the individual budget will be the difference between the clothing item in the Budget Guide and the verified value of the assistance in kind.

c. Shelter

A number of factors will effect variations in the amount in each individual budget for shelter. Some applicants will be able to obtain free rent from relatives or friends. County departments will want to keep in mind the requirement of The Welfare Act of 1936 which provides for the granting of assistance in an amount sufficient to enable the recipient to live under conditions compatible with decency and health. It should be remembered too, that poor construction will affect the amount of fuel required for heat. Where an applicant is

living in unhealthful or unsanitary surroundings, a plan might be worked out with him to include an amount for shelter which will permit him to obtain more satisfactory living arrangements after his first award. This same plan would be possible where the applicant is living in an institution, but plans to make his home elsewhere after receiving blind assistance.

When an applicant or a recipient owns his home the following items should be considered in determining the necessary expenses for shelter: taxes, insurance, mortgage payments and interest, and upkeep. This applies particularly to current taxes but since it is obviously the intention of The Welfare Act to enable recipients to retain their homes, county departments should determine the status of the taxes on the property and if delinquent, include an amount for meeting them in computing the assistance award. In some cases this may necessitate an increase in the award for several months and a decrease after payment has been completed. It is urged that county departments develop some policy relative to the amount to be allowed in all cases for ordinary maintenance expense and when more extensive repairs are necessary, provide for them in the award after verification has been made of the amount needed. Due to the limitation on the amount of the award, it may be necessary to budget for this expense over a period of several months in the same manner as for delinquent taxes. County departments should budget the other items mentioned as possible shelter expenses in the verified amount.

d. Fuel

The item of fuel on the Budget Guide is figured for a person using fuel for heating only. The amount to be allowed on the individual budget for fuel will depend therefore upon the living conditions of the applicant, the means of heating his house, whether by furnace or stove, the size of his home, the type of fuel used, and whether or not additional fuel is needed for cooking purposes. If a blind person is living in one room and the heat is included in the rent, no allowance should be made for the item of fuel in his individual budget. Where the applicant is living in a larger house, however, or a poorly constructed one, which may be hard to heat, more fuel than that allowed in the Budget Guide may be required. The type of fuel used for heat will also be a factor, whether it is coal, wood, kerosene, etc. Some county departments may want to make a larger allowance for fuel during the winter months and discontinue it during the summer. Other county departments will feel that a smaller amount should be allowed throughout the year, making it possible for the recipient of assistance who is able to save his money, to purchase at least part of his winter's supply during the summer at a saving in cost.

Some applicants may be able to provide at least a part of their fuel needs. Oftentimes they will have wood available and will need no allowance for fuel or at least a lesser amount than that listed in the Budget Guide for fuel. Relatives may be willing to assume all or part of the fuel needs and should be encouraged to do so. In such instances the individual's fuel needs would not be as great as the amount allowed in the Budget Guide since the latter was computed for

a blind person with no resources. The amount to be deducted will depend upon the amount which the applicant can provide. Any amount granted in excess of the Budget Guide allowance would depend upon the special needs of the individual and of his home.

The following table may be of assistance in estimating individual fuel needs that are less than or in excess of the Budget Guide.

Number of rooms	Heating (period one ton will heat computed on yearly basis)
2	7 weeks
3 to 4	6 weeks
5	5 weeks
6 to 8	3 weeks or less

Number of rooms	Heating and cooking
2	6 weeks
3 to 4	5 weeks
5	4 weeks
6 to 8	2½ weeks

If coal is used for cooking during the summer, one ton will last 6 to 8 weeks.

e. Utilities

The allowance for utilities on the individual budget will depend upon several factors including the rate in that section of the county where the applicant is living. Sometimes utilities may be included in the rent and no special allowance for them may be required. When there will be an item of the individual budget, however, allowed for them it should be allowed in accordance with the type of utility required. That is, some applicants may require an allowance for electricity, which allowance will depend not only upon the size of the house, but the rate in the section of the county where the house is located. The same is true of an allowance for gas. Some blind persons will require an allowance for kerosene since that is the means used by them for providing light and cooking fuel. An amount may be allowed for water if it is not included in the rent. In determining the amount of the individual budget item for utilities, therefore, county departments will want to take into consideration not only the specific utilities used, but the rate and also reasonable consumption of each utility.

f. Household

The amount allowed for operating cost of the household will depend upon the conditions under which the applicant is living. Where he is occupying a house or room, in which he is cooking his meals, an allowance may be necessary to cover the cost of household articles and of replacement, whereas if he is rooming and buying his meals or boarding, such an allowance may not be necessary. Some allowance would probably be necessary for all persons living alone for replacement of such items as bed linen, blankets, soap, etc., unless replacement of such items is included in the room rent. County departments may want to grant a larger allowance to replenish a depleted supply of household items where such a need is evident and later decrease it to allow only enough to maintain the supply.

g. Health

The allowance for health in the Budget Guide has been computed by the county department to meet only incidental household medicine and first aid supplies. The Welfare Act provides that recipients of blind assistance are ineligible for other forms of public relief, except for temporary medical or surgical assistance and necessary hospital expenses. Since the maximum amount of blind assistance which may be granted to any one individual in one month is $30, it is obvious that protracted hospitalization cannot be paid for out of this amount. County departments will, therefore, want to work out cooperative arrangements with township trustees in these instances where protracted medical care or hospitalization is necessary. In some instances, it may be possible to meet an increased medical need through an increase in the amount of the blind assistance award. In establishing the individual budget of an applicant or recipient, it is possible to give consideration to any special health problem he may have and, if his medical needs are definitely measurable and have been verified through medical authority, an additional allowance can be made in the award provided the total amount of assistance does not exceed $30 monthly. In no case should the award be increased to include eye treatment until the treatment plan has been approved by the state supervising ophthalmologist. In this manner, it is possible to grant an amount to meet either current medical costs or a larger medical or hospital bill which could be paid in monthly installments by the recipient from his blind assistance allowance increased in amount over a period of several months and then discontinued. When such an allowance is made, an adequate explanation should be recorded in the narrative record. In addition to this possible provision for medical care, the facilities of the eye treatment program are available to eligible recipients. (See Chapter IV, Section 6, Eye Treatment).

h. Insurance

If the applicant has been paying on an insurance policy, the amount of which is within the standard approved by the state department to cover burial costs, an allowance might be made to cover the premium. The allowable amount would be only sufficient to meet premium payments of a policy which meets the standard of the county department. If the premiums are being paid by a relative or friend, no allowance will be necessary. Since insurance does act as a form of security, its discussion requires sympathetic handling and inclusion of an amount in the individual budget will depend upon individual circumstances.

i. Personal Care

Some blind applicants may, because of physical or mental infirmities, require the services of an individual on a part or full time basis in assuming partial or full responsibility of caring for them. An allowance may be made for personal care if the individual circumstances indicate such an allowance is necessary. Such an allowance may be included in the award if it is found that the responsibility of caring for the applicant or recipient keeps the spouse or relative from seeking remunerative employment. In many cases adult members of the household in which the applicant or recipient resides will be able and willing to provide this care, in which case no amount should be included for this item.

j. Miscellaneous

Some blind persons will have needs which do not properly fall into one or the other budget items. An amount for this item might cover the cost of barbering, newspapers, church dues and other incidental expenses allowed by the county department in the establishing of the Budget Guide.

C. BASIC BUDGET PROCEDURES

1. General Statement

The working out of the individual budget for the blind recipient should be given most careful consideration by the visitor and his final recommendation to the director of an award should be made only after all the factors in a situation have been studied. The particular living arrangements of the applicant or recipient will suggest what budgetary procedure to follow. The budget procedure for an applicant or recipient living alone is relatively simple, but is a more complicated matter when he lives as a part of a family group.

2. Budget Procedure to be used in Determining Extent of Financial Ability of Legally Responsible Relatives in Whose Home the Blind Applicant or Recipient Resides

a. General Statement

When a blind applicant or recipient is a member of a household in which there resides some one who has a legal responsibility for his support, the problem of determining the extent of financial ability of the legally responsible relatives to assist the applicant or recipient becomes a difficult one. In order to establish a uniform procedure the following is being set up as a tentative guide:

In considering the financial ability of the legally responsible relatives to assist, there is no intention that they deprive themselves of necessities merely to provide for the applicant or recipient; in other words, their budgetary needs should be figured on a fairly liberal basis, rather than on a strictly relief basis. The question immediately arises as to what constitutes a fair basis for determining the financial ability of these relatives to assist.

Each county department is using a Budget Guide for blind assistance, which is supposed to reflect actual living costs for one person living alone in the respective counties of the state. Therefore, it would seem logical to incorporate the use of this already existing budget to assist in working out a family budget for the legally responsible relative living in the same household group as the applicant or recipient.

The budget items for the family and the suggested amounts may be determined for each item as follows:

(1) Food

The amount indicated for food in the Budget Guide for blind assistance multiplied by the number in the family, excluding the applicant or recipient, minus 10% if the relative group consists of two or three persons, minus 15% if the relative group consists of from four to nine persons, or minus 20% if the relative group consists of more than nine persons.

(2) Clothing

The amount indicated in the Budget Guide for blind assistance multiplied by the number in the family, excluding the applicant or recipient.

(3) Shelter

The actual cost of shelter for the household either in rent or taxes, property upkeep and mortgage payments, in case property is owned or being purchased. These amounts should be verified.

(4) Fuel

Actual monthly expenditures, which can be verified from paid bills, statements of coal dealer, etc.

(5) Utilities

Actual monthly expenditures for cooking fuel, lighting, (either electricity or kerosene) and water. These should be itemized separately and verified if possible.

(6) Household

Consideration should be given to the purchase and maintenance of household supplies and incidental household expenses. In counties having a budget item covering this the amount might be multiplied by the number in the household excluding the applicant or recipient.

(7) Health

The amount indicated in the Budget Guide for blind assistance multiplied by the number in the family, excluding the applicant or recipient.

(8) Insurance

Actual monthly insurance expenditures of the relative group, excluding the applicant or recipient. These amounts should be verified

(9) Miscellaneous

Consideration should be given here to expenditure for recreation, transportation, and incidental items, such as church dues, etc. In counties having a budget item covering incidentals, this amount might be multipled by the number in the household, excluding the applicant or recipient. Transportation costs can be figured for each family depending upon the actual needs of the family. An estimate will have to be made for recreation and education dependent upon the age range and number of persons involved.

In determining the amount for food, clothing and medical needs the amounts suggested above should be increased to take care of any unusual needs in a particular family. For example, if some member of the family needs a special diet or frequent contact with a physician, special allowance should be made for these items.

The income from wages of the relative group should be determined and verified. Income from sources other than wages should likwise be verified.

b. Three types of Income Situations May Arise

(1) If the needs of the family as determined by the above process are greater than the income, consideration should be given to including in the blind person's budget his share in the maintenance items (shelter, fuel, utility, household expenses) as well as his personal needs (food, clothing health, insurance, personal care, miscellaneous) in the amount of blind assistance recommended.

(2) If the needs and the income of the family are approximately the same, the relative group should share the maintenance items of the home with the blind person while his personal needs may be met through blind assistance.

(3) If the needs of the legally responsible relatives with whom the applicant or recipient resides are less than their income the surplus may be sufficient to meet the needs of the blind person and no assistance may be necessary, or at least a portion of his needs may be met in this way.

3. Budget Procedure to Follow in Determining Extent of Financial Ability of Morally Responsible Relatives in Whose Home the Blind Applicant or Recipient Resides

a. General Statement

When a blind applicant or recipient is living as a part of a family group for whom he has no legal responsibility, and the members in the family group have no legal responsibility for him, but do have a moral responsibility, the problem of measuring the financial ability of these persons to assist with the care of the applicant or recipient is a difficult one. With persons having only a moral responsibility to the applicant or recipient as with those having a legal responsibility, there is no intention that they deprive themselves of necessities merely to provide for the blind person. A liberal budget policy, therefore, should be established in determining the extent of

their financial ability to assist. The procedure outlined below is intended as a guide in reaching decisions on cases of this sort.

The needs of the family group excluding the applicant or recipient should be determined in accordance with the budget procedure outlined in item IV-C-2 taking full recognition of the unusual needs of each particular family group. The income of the family group from all sources excluding the applicant or recipient should be determined and verified, insofar as possible. After establishing the needs and the income of the family group, the decision as to the amount of the award to recommend will be based on one of the three conclusions mentioned below:

(1) If the budgeted needs of the family group are greater than the verified income, obviously they will have no surplus to use in meeting the personal needs of the applicant or recipient. In cases of this sort, consideration should be given so as to include in the recommended grant something as the blind person's share in the maintenance items of the home as well as his personal needs in the amount of blind assistance to be recommended.

(2) If the budgeted needs of the family group are just equal to their verified income, while they may have no surplus to spend in meeting the personal needs of the blind person, nevertheless, they should share the maintenance items of their home with him. In cases of this sort, if the presence of the blind person in the home imposes no additional financial burden upon the family group so far as the cost of maintenance items of the home are concerned, the family group should share the home with the blind person and an award would be recommended in an amount to cover only the personal needs of the applicant or recipient, such as food, clothing, insurance, medical, etc.

(3) If the needs of the family group are less than the verified income, it is expected that the family group will share the maintenance items of the home with the applicant or recipient. In addition to this, if they are able financially to assume full support of the blind person, they should be urged to do so. If they are unable to meet all of the needs of the applicant or recipient, they should be urged to meet whatever portion of his needs they can. In instances where the family group is able but unwilling to provide for the personal items of the blind person's budget, an award may be recommended to cover these needs; however, maintenance items of the home should not be included in the award.

4. Budget Procedure to follow when an Applicant or Recipient has Dependents for whom he is Legally Responsible

a. General Statement

When a blind applicant or recipient is living as part of a family group the members of which are his legal dependents, the income of the applicant or recipient should be combined with the income of the dependents. The needs of the dependents excluding the applicant or recipient should be determined in accordance with the budget procedure established in Chapter II, Section 6, IV-C-2.

The combined income of the applicant and the dependents from all sources should be determined and verified.

After establishing the needs of the dependents of the applicant or recipient and their incomes combined with that of the applicant, the decision as to the amount of the award to recommend will be based on one of the three conclusions mentioned below:

(1) Insufficient Funds to Meet Needs

If the combined income of the applicant or recipient and his dependents is less than the budgeted needs of the dependents, the award for blind assistance should include the personal needs of the applicant or recipient and may include something as the applicant's or recipient's share in the maintenance items of the home. The applicant's or recipient's allowance for maintenance items of the home should in no instance be in excess of the difference between the combined incomes and the budgeted needs of the dependents. If the amount allowed the applicant or recipient for any given item of the budget is in excess of the amount of the Budget Guide for that item, an explanation of the increased amount of the budget item should be given as is done in all other situations.

(2) Combined Income Equal to Budgeted Needs of Dependents

If the combined income of the applicant or recipient and his dependents is just equal to the budgeted needs of the dependents, probably the dependents of the blind person can share the maintenance items of the home with the blind person so that only his personal needs would have to be met through blind assistance.

(3) Combined Income Greater than Budgeted Needs of Dependents

If the combined income of the applicant or recipient and his dependents is greater than the budgeted needs of the dependents, the difference between the combined incomes and the amount of the entire needs of the dependents should be considered as a resource available to meet the personal needs of the blind person in figuring his individual budget. It should be remembered in instances of this sort, that the dependents would probably be able to share the home with the blind person, thus making it unnecessary to allow anything for maintenance items of the home in figuring the individual budget of the applicant or recipient.

D. BUDGET AND RECOMMENDATION FORM, DPW FORM 5A (REVISED)

1. General Comments

This form is to be used in figuring the budget on all new applications and reapplications and in figuring the budget on all reinvestigations. It will serve as a work sheet in making up budgets and since the estimated needs and income and the verified needs and income for a person eligible for blind assistance appears on this sheet a condensed financial statement is available for use. Information reported here may be amplified in the narrative record. After action by the county board, DPW Form 5A (Revised) should be returned to the clerk or visitor for filing in the case folder.

2. Instructions for Filling out DPW Form 5A (Revised)

Name

Enter here full name of applicant or recipient.

Address

Address listed here should be the one current with applicant or recipient for the time budget becomes effective.

Application Number

The application will be the same code and serial number as was assigned to the application.

Date

Enter here the date the budget is to become effective. If for

a limited time as for a month enter as January 1, 1938 to February 1, 1938. If budget will be effective until reinvestigation enter beginning date followed by dash as: January 1, 1938 ———————.

I. Monthly Requirements

The four columns under this title represent statement of need by household and applicant or recipient and worker's verification of these needs.

I A 1 Household

If applicant or recipient is living alone mark out column by drawing line from upper left to lower right corner. If applicant or recipient is a member of a relative's household, list in the appropriate spaces the family's own estimate of their needs, excluding applicant's or recipient's needs.

I A 2 Individual for Whom Assistance is Requested

Enter applicant's or recipient's own estimate of his needs.

If any assistance is received in kind indicate by a dash or name of item in proper space to show that the item has been given consideration by visitor.

I B 1 Visitor's Verification of Need: Household

If applicant or recipient is living alone mark out column by drawing line from upper right to lower left corner. If applicant or recipient is a member of a relative's household enter visitor's verification of needs of household excluding applicant, as computed by application of the Budget Guide in accordance with method outlined in Basic Budget Procedures, Chapter II, Section 6, IV-C.

I B 2 Visitor's Verification of Need: Individual for Whom Assistance is Requested

Enter here visitor's determination of need as computed by application of Budget Guide. If total assistance for any item is received in kind enter a dash. If only partial assistance for any item is received in kind enter the difference between the value of the assistance in kind and the amount indicated for the item on the Budget Guide.

II. Monthly Income

The four columns represent statement of income of the household and of applicant or recipient seeking assistance and verification of income as determined by visitor.

II A 1 Household

Enter here statement of income of members of the family excluding that of the applicant or recipient, showing source.

If assistance is received in kind designate type of assistance and approximate value, denoting source.

If applicant or recipient lives alone mark out column by drawing line from upper right to lower left corner.

II A 2 Individual for Whom Assistance is Requested

Enter here applicant's or recipient's statement of his own income.

If assistance is received in kind list type of assistance and approximate value, denoting source.

II B 1 Household

Enter here visitor's verification of cash income or value of assistance in kind received in the household from others than recipient or applicant.

If applicant or recipient lives alone mark out column by drawing line from upper left to lower right corner.

II B 2 Individual for Whom Assistance is Requested

Enter here verified monetary income of applicant or recipient.

If applicant or recipient receives assistance in kind list in proper space denoting source but do not include value of these items in this column.

If, in comparing the totals in columns I B 1 and II B 1, there is a surplus over household needs, enter the surplus in this column (II B 2) as income available for meeting the needs of the applicant or recipient.

III. Monthly Deficiency

This division contains summary of visitor's findings in divisions I and II, the budget deficiency and the visitor's recommendation.

Visitor's Verification of Need

Enter here total of column I B 2.

Visitor's Verification of Income

Enter here total of column II B 2.

Deficiency

Enter here result of subtracting total of column II B 2 from total of column I B 2.

Visitor's Recommendation

Enter here the amount to be recommended by the visitor. This amount should always be expressed in terms of an even dollar.

IV. Recommendation of Visitor

V. Recommendation of Director

Division IV is the visitor's recommendation to the director. Here should be entered the recommendation of an award, rejection, change in award, or withdrawal, whichever action is indicated as a result of the investigation. The reason or reasons for recommendation should be stated when an award is denied or changed.

Division V is the director's recommendation to the board. If this is not in agreement with the visitor's recommendation reasons for his change should be indicated.

VI. Recommendation of County Board of Public Welfare

When any recommendation made to a county board by the county director concerning an award, change of award, rejection or withdrawal of assistance is in any way altered by the county board the reason or reasons for such change must be recorded in detail in this division. The officer of the board presiding at the meeting at which the change is made must affix his signature to the reasons changing the recommendation of the director. If the county board accepts the recommendation of the county director, it is unnecessary for this division of the form to be filled out.

E. CONDITIONAL OR RESTRICTED GRANTS

Under the Social Security Board's interpretation of Section 1006 of Title X of the Social Secutiry Act, only those money payments are matchable with Federal funds which are unconditionally paid to the blind recipient or duly appointed legal guardian. In this connection the following is a statement of the Social Security Board policy which has been transmitted to the state department:

> "Sections 6, 406(b) and 1006 of the Social Security Act have been interpreted by the Board to mean that only those money payments are matchable with Federal funds which are unconditionally paid to a grantee or his duly appointed legal guardian. Where, as in the ordinary case, payment is made by check or warrant, the instrument of payment should be drawn to the order of the grantee or such guardian, and delivery thereof effected to the payee.
>
> "The test of restriction or condition is whether such payment is made to the grantee subject to any agreement, expressed or implied, that the ownership or control of the expenditure of the proceeds of such payment is subject directly or indirectly to the dominion of a person who is not the grantee or his legally appointed guardian. A payment to be unrestricted must consist of an unconditional transfer and delivery of money to the grantee."

A brief review of the responsibility of county departments in connection with their administration of the public assistance programs may help to clarify the application of the regulations on conditional or restricted grants. County departments in Indiana by law, implemented by rules and regulations of the state department, have the responsibility for the determination of eligibility of an applicant on a needs basis and for setting up a grant on a budget basis that will meet the needs of the applicant. Any information that may be secured either through rent or other receipts, statements of physicians, verification of resources, etc., that would support the need of the individual, is pertinent to be included as a part of the investigation process and the case record. However, when a grant is determined and payment made to the recipient, it then becomes the responsibility of the recipient to handle the funds so granted and any device that may be developed to establish a check on his expenditures in relation to the budget as developed by the county department, or any attempt of the county department to control the use of all or part of the grant, would be a form of restriction or condition upon the payment made. The use of any such device or attempt at control implies that the county department sees its function not only as determining need and the amount of the grant, but as assuming a measure of responsibility for the expenditure of the grant.

There is, however, a service that county departments may, and do, very properly render to some recipients, in assisting them in planning their expenditures but this is quite different from a month-by-month check with the implied or expressed intent of modifying the budget items in the grant if the person is not spending his money in accordance with the items as set forth in the budget. Similarly, a procedure by which a county department assumes responsibility for making expenditures for a recipient is a form of condition, even though originally a check is made out to the individual and delivered to him. Of course, it is important that the recipient understand clearly the amounts allowed for certain budget items and how these amounts are arrived at, since he has the problem of providing the necessities of life on a limited amount of money. However, the way he uses his grant is his responsibility and not that of the county department.

At the time of a regular reinvestigation, it is assumed that the county department will wish to review the needs of the individual to note any changes in budget items that may have occurred because of a need that was not present at the time the grant was first established, or because of income not present at the time of the initial investigation. It is, of course, proper procedure for the county department in such cases, to verify the increased or decreased amounts through examining receipts, checking with landlords, or doctors, verifying earnings and the like. The statement of policy on unconditional payments does not in any way interfere with changing of awards on the basis of verified needs. However, it is important that such verification have to do with current needs, and that the necessary checking is done to establish the fact of continued need and not to control the grant in those instances in which the assistance previously given has not been spent in accordance with the recipient's budget as determined by the county department. Under the provisions of the regulations of the state department on conditional or restricted grants, it is not anticipated that a county department will establish controls to see that funds are being used for the purposes for which granted. There will, of course be certain problem situations, in which some recipients, because of their indiscreet use of their grants, will arouse public opinion and bring criticism on the county department for unwise use of public funds. These situations require service in assisting the person to plan his expenditures or they may call for the making of an entirely different plan to meet the needs of that individual through the appointment of a guardian or responsible person, if the person has demonstrated that he cannot meet his own needs through the use of the grant.

There are certain recipients, who find it necessary to delegate the actual expenditure of their grants to relatives or friends. Such an arrangement would not be considered a restrictive grant and there would be no question in regard to reimbursement. No member of the county department staff, however, nor of the county board, shall serve as an agent for this purpose, because in that event the question is immediately raised as to whether or not there is an implied condi-

tion on the assistance granted, and, for auditing purposes, this would create the presumption that the payments were restrictive.

Any local policies or procedures which might be interpreted as rendering grants conditional or restricted should be discussed with the district representative of the state department.

BUDGETARY PROCEDURES	APPLICANT OR RECIPIENT LIVING WITH A LEGALLY RESPONSIBLE RELATIVE	APPLICANT OR RECIPIENT LIVING WITH A MORALLY RESPONSIBLE RELATIVE	APPLICANT OR RECIPIENT RESPONSIBLE FOR LEGAL DEPENDENT 'S)
NEEDS GREATER THAN INCOME	IF THE NEEDS OF THE FAMILY** ARE GREATER THAN THE INCOME, CONSIDERATION SHOULD BE GIVEN TO INCLUDING THE BLIND PERSON'S SHARE IN THE MAINTENANCE ITEMS OF THE HOME AS WELL AS HIS PERSONAL NEEDS IN THE AMOUNT OF THE BLIND ASSISTANCE RECOMMENDED.	IF THE NEEDS OF THE FAMILY** ARE GREATER THAN THE INCOME, CONSIDERATION SHOULD BE GIVEN SO AS TO INCLUDE SOMETHING AS THE BLIND PERSON'S SHARE IN THE MAINTENANCE OF THE HOME. AS WELL AS HIS PERSONAL NEEDS IN THE AMOUNT OF ASSISTANCE RECOMMENDED.	IF THE COMBINED INCOME OF THE APPLICANT AND DEPENDENT(S) IS LESS THAN THE BUDGETED NEEDS OF THE DEPENDENT(S) THE AWARD FOR BLIND ASSISTANCE SHOULD INCLUDE THE PERSONAL NEEDS OF THE APPLICANT AND MAY INCLUDE SOMETHING AS THE APPLICANT'S SHARE IN THE MAINTENANCE ITEMS.
NEEDS AND INCOME APPROXIMATELY THE SAME	IF THE NEEDS OF THE FAMILY** ARE APPROXIMATELY THE SAME AS THE INCOME, THE RELATIVE GROUP SHOULD SHARE THE MAINTENANCE ITEMS OF THE HOME WITH THE BLIND PERSON WHILE PERSONAL NEEDS WOULD BE MET THROUGH BLIND ASSISTANCE.	IF THE NEEDS OF THE FAMILY** ARE APPROXIMATELY THE SAME AS THE INCOME, THE RELATIVE GROUP SHOULD SHARE THE MAINTENANCE ITEMS OF THE HOME WITH THE APPLICANT WHILE HIS PERSONAL NEEDS COULD BE MET THROUGH BLIND ASSISTANCE.	IF THE COMBINED INCOME OF THE APPLICANT AND DEPENDENT(S) IS JUST EQUAL TO THE BUDGETED NEEDS OF THE DEPENDENT(S) PROBABLY THE DEPENDENT(S) OF THE BLIND PERSON CAN SHARE THE HOME WITH THE BLIND PERSON WHILE PERSONAL NEEDS WOULD HAVE TO BE MET THROUGH BLIND ASSISTANCE.
NEEDS LESS THAN INCOME	IF THE NEEDS OF THE FAMILY** ARE LESS THAN THE INCOME, THE SURPLUS INCOME SHOULD BE USED TO MEET THE PERSONAL NEEDS OF THE APPLICANT OR RECIPIENT OR AT LEAST A PORTION OF HIS NEEDS.	IF THE NEEDS OF THE FAMILY** GROUP ARE LESS THAN THE INCOME, THE FAMILY GROUP SHOULD SHARE MAINTENANCE ITEMS AND IN ADDITION SHOULD BE URGED TO ASSUME RESPONSIBILITY FOR ALL THE PERSONAL ITEMS WHICH THEY ARE ABLE TO ASSUME.	IF THE COMBINED INCOME OF THE APPLICANT OR RECIPIENT AND THE DEPENDENT(S) IS GREATER THAN THE BUDGETED NEEDS OF THE DEPENDENT(S), THE SURPLUS AMOUNT SHOULD BE USED AS A (CASH) RESOURCE AVAILABLE TO MEET THE PERSONAL NEEDS OF THE BLIND PERSON IN FIGURING HIS INDIVIDUAL BUDGET.

**FAMILY REFERS TO THE FAMILY OF THE RESPONSIBLE RELATIVE AND EXCLUDES THE APPLICANT OR RECIPIENT.

P-2938-9-14-38

Prescribed by State Department of Public Welfare
and Approved by State Board of Accounts

BUDGET ESTIMATE

County_____ FOOD PRICES DPW Form 19

Date_____ Schedule A
(Revised)

Food Items (1)	Quan. (2)	Store No. 1 (3)	Store No. 2 (4)	Store No. 3 (5)	Store No. 4 (6)	Item Average (7)	Group Average (8)	Quant. 1 Person (9)	Monthly Cost of Food 1 Person (10)
MEAT AND FISH:	lb.							6½	
Pork Sausage Ground Beef Beef Chuck Boiling Beef Beef liver Pork liver Salt pork or jowl Lamb stew Fish (not over 15¢)									
COTTAGE CHEESE	lb.							2	
EGGS:	doz.							1½	
Fresh, ungraded									
MILK:									
Pasteurized whole	qt.							15	
FLOUR:	lb.							12	
White, first qual. Bread, white Bread, whole wheat									
OTHER CEREALS:	lb.							8	
Corn meal, white Rolled oats Rice Spaghetti Dried cereal									
DRIED FRUIT:	lb.							2½	
Raisins Peaches Apricots Prunes									
FRESH FRUIT:	lb.							8	
Apples Bananas Oranges (small)									
BUTTER	lb.							2½	

P-2392a-8-22-38

DPW Form 19

BUDGET ESTIMATE

Schedule A
(Revised)

FOOD PRICES

Food Items	Quan.	Store No. 1	Store No. 2	Store No. 3	Store No. 4	Item Average	Group Average	Quant. 1 Person	Monthly Cost of Food 1 Person
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
SUGAR: white, granulated	lb.							5	
POTATOES: Irish Sweet	lb.							15	
COFFEE:	lb.							3	
DRIED BEANS: Navy Kidney Lima	lb.							3½	
LARD, BACON AND FATS Lard Bacon - fat Oleo	lb.							4	
TOMATOES AND OTHER VEGETABLES: Tomatoes - canned Spinach Onions Cabbage Other leafy green or yellow-colored veg. (not over 6¢ per lb.	lb.							24	

Total Cost One Adult $_____

Original to State Department
1 Copy to County Department

P-2392a-8-22-38

Prescribed by State Department of Public Welfare
and Approved by the State Board of Accounts

BUDGET ESTIMATE

County_____

CLOTHING PRICE LIST

DPW Form 19

Date_____

Schedule B 5

Adult Man

Item (1)	Store No. 1 (2)	Store No. 2 (3)	Store No. 3 (4)	Average Cost (5)	Number (6)	Years to be worn (7)	Annual Cost (8)
Overcoat					1	4	
Sweater or jacket					1	2	
Heavy suit(2 pr. trous.)					1	3	
Light suit(1 pr. trous.)					1	3	
Summer wash trousers					2	2	
Shirts					4	1	
Hat					1	2	
Gloves or mittens					1	1	
Hose					6	1	
Shoes					2	1	
Rubbers					1	1	
Union suits (heavy)					2	2	
Union suits (light)					2	2	
Pajamas					3	2	
Ties					2	1	
Handkerchiefs					8	1	
House Slippers					1	1	
Personal upkeep							
Others (Specify)							

Total Annual Cost$_____

Divide by 12 to obtain Monthly Cost $_____

Original to State Department
1 Copy to County Department

Prescribed by State Department of Public Welfare
and Approved by the State Board of Accounts

BUDGET ESTIMATE

County_____

CLOTHING PRICE LIST

DPW Form 19

Date_____

Schedule B 6

Adult Woman

Item	Store No. 1	Store No. 2	Store No. 3	Average Cost	Number	Years to be worn	Annual Cost
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Winter coat					1	2	
Sweater or jacket					1	2	
Wool dress					1	2	
Rayon or silk dress					1	2	
Good cotton dress					1	2	
House dresses					3	1	
Aprons					5	1	
Hat (winter)					1	2	
Hat (summer)					1	2	
Gloves					1	2	
Hose					6	1	
Shoes					2	1	
House slippers					1	2	
Rubbers or galoshes					1	2	
Vests					3	1	
Bloomers					3	1	
Slips					3	1	
Gowns (cotton)					2	2	
Gowns (flannel)					2	2	
Brassiere					2	1	
Girdle					1	1	
Handkerchiefs					8	1	
Personal upkeep							
Others (specify)							

Total Annual Cost$_____

Divide by 12 to obtain Monthly Cost $_____

Original to State Department
1 Copy to County Department

Prescribed by the State Department of Public Welfare
and approved by State Board of Accounts

BUDGET ESTIMATE

County_____

CLOTHING PRICE LIST

DPW Form 19

Date_____

Eldorly Man

Schedule B7

Item (1)	Store No. 1 (2)	Store No. 2 (3)	Store No. 3 (4)	Average Cost (5)	Number (6)	Years to be Worn (7)	Annual Cost (8)
Overcoat					1	3	
Sweater					1	2	
Suit					1	3	
Trousers (extra)					1	2	
Hat					1	2	
Cap					1	2	
Gloves or mittens					1	1	
Shoes					2	1	
Shoe repairs					2	1	
Rubbers					1	1	
Shirts					4	1	
Union Suits (heavy)					2	2	
Union Suits (light)					3	2	
Pajamas					3	2	
Hose					6	1	
Ties					2	1	
Suspenders					1	1	
Garters					2	1	
Handkerchiefs					4	1	
House slippers					1	1	
Personal upkeep							
Others (specify)							

Total Annual Cost $_____

Divide by 12 to obtain Monthly Cost $_____

Original to State Department
1 Copy to County Department

P-2392-3-21-38

Prescribed by State Department of Public Welfare
and Approved by State Board of Accounts

BUDGET ESTIMATE

County_____ RENT COSTS DPW Form 19

Date_____ Schedule C

Number of Rooms	AVERAGE MONTHLY RENT					
	URBAN		SUBURBAN		RURAL	
	MODERN	NOT MODERN	MODERN	NOT MODERN	MODERN	NOT MODERN
1						
2						
3						
4						
5						
6						
7						
8						

Average Monthly Rent for House of one to four rooms for all types $_____.

Average Monthly Rent for House of one to eight rooms for all types $_____

Original to State Department
1 Copy to County Department

P-2392-3-21-38

Prescribed by State Department of Public Welfare
and approved by State Board of Accounts

BUDGET ESTIMATE

County_____ FUEL PRICE LIST DPW Form 19

Date_____ Schedule D

Kind of Fuel	Unit	Price Per Unit			Average Price Per Ton
	Ton	Dealer No. 1	Dealer No. 2	Dealer No. 3	
Medium Grade Indiana Lump Coal					

Total of Averages $_____

Divide by Number of Kinds of Fuel to Obtain Average Price Per Ton $_____

In the state as a whole a one to four room house requires one ton in 6 to 7 weeks on an annual basis, or a total of nine tons per year.

One to four room house average cost $_____ per year.

Divide by 12 to obtain monthly cost $_____.

Original to State Department
1 Copy to County Department

P-2392-3-21-38

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and approved by State Board of Accounts

BUDGET ESTIMATE

County_____ COST OF UTILITIES DPW Form 19

Date_____ Schedule E

UTILITY	MINIMUM RATE PER MONTH						
	Rate Area Number 1	Rate Area Number 2	Rate Area Number 3	Rate Area Number 4	Rate Area Number 5	Total	Average Min.per Month
Electricity							
Gas							
Water							

Original to State Department
1 Copy to County Department

P-2392-3-21-38

Prescribed By State Department of Public Welfare and Approved by the State Board of Accounts

DPW Form 49 (Revised)

THE COUNTY DEPARTMENT OF PUBLIC WELFARE

OF _____ _____ COUNTY

_____ INDIANA

BUDGET GUIDE FOR ASSISTANCE TO THE BLIND

For Blind Person Without Resources

BUDGET ITEM	MONTHLY AMOUNT
Food	$_____
Clothing	$_____
Shelter	$_____
Fuel	$_____
Utilities	$_____
Electricity	$_____
Gas	$_____
Water	$_____
Household	$_____
Health	$_____
Insurance	$_____
Personal Care	$_____
Miscellaneous	$_____
	$_____
Total	$_____

Above budget adopted by County Board of Public Welfare of _____ County in meeting held on the _____ day of _____, 19____, for recommendation to State Department of Public Welfare.

Signed by order of the County Board

(SEAL)

_____
County Director of Public Welfare

Approved by _____
Div. of Public Assistance
of State Department

Date _____

Prepare in Triplicate
1. 2 copies to State Dept. Pub. Wel. ☐
2. 1 copy to County Dept. Pub. Wel. ☐

ESCRIBED BY STATE DEPARTMENT OF PUBLIC WELFARE
AND APPROVED BY STATE BOARD OF ACCOUNTS

DPW FORM SA
(REVISED)
75M-11-1-39

_____ COUNTY

BUDGET AND RECOMMENDATION FORM

ME _____ APPLICATION NUMBER ___ ___ ___
TYPE CODE SERIAL

DRESS _____ DATE _____

I. MONTHLY REQUIREMENTS

	A. STATEMENT OF NEED		B. VISITOR'S VERIFICATION OF NEED	
	1. HOUSEHOLD	2. INDIVIDUAL(S) FOR WHOM ASSISTANCE IS REQUESTED	1. HOUSEHOLD	2. INDIVIDUAL(S) FOR WHOM ASSISTANCE IS REQUESTED
OD				
OTHING				
ELTER				
L				
LITIES				
ELECTRICITY				
GAS				
WATER				
USEHOLD				
ALTH				
URANCE				
CREATION				
JCATION				
ARD				
SONAL CARE				
CELLANEOUS				
TOTAL				

II. MONTHLY INCOME

	A. STATEMENT OF INCOME		B. VISITOR'S VERIFICATION OF INCOME	
	1. HOUSEHOLD	2. INDIVIDUAL(S) FOR WHOM ASSISTANCE IS REQUESTED	1. HOUSEHOLD	2. INDIVIDUAL(S) FOR WHOM ASSISTANCE IS REQUESTED
ISTANCE IN KIND				
(SPEC. SOURCE)				
SH INC. (SPEC. SOURCE)				
AGES				
ROPERTY				
OMPENSATION				
ENSION				
ELIEF				
THER				
TOTAL				

MONTHLY DEFICIENCY

VISITOR'S VERIFICATION OF NEED I B-2 $ _____

VISITOR'S VERIFICATION OF INCOME II B-2 $ _____

DEFICIENCY (MONTHLY) $ _____

VISITOR'S RECOMMENDATION $ _____

MMENTS:

IV. RECOMMENDATION OF VISITOR

THAT ASSISTANCE BE GRANTED IN THE AMOUNT OF $_____, EFFECTIVE _____, 19__

OR, THAT ASSISTANCE BE DENIED FOR THE FOLLOWING REASON(S):

OR, THAT NO CHANGE BE MADE IN THE AMOUNT OF ASSISTANCE TOTALING $_____

OR, THAT ASSISTANCE PREVIOUSLY GRANTED BE CHANGED FROM $_____TO $_____ EFFECTIVE _____, 19____, FOR THE FOLLOWING REASON(S):

OR, THAT ASSISTANCE PREVIOUSLY GRANTED IN THE AMOUNT OF $_____ BE WITHDRAWN, EFFECTIVE _____, 19____, FOR THE FOLLOWING REASON(S):

DATE _____, 19_____ SIGNED _____
VISITOR FOR COUNTY DEPARTMEN

V. RECOMMENDATION OF COUNTY DIRECTOR OF PUBLIC WELFARE

THAT ASSISTANCE BE GRANTED IN THE AMOUNT OF $_____, EFFECTIVE _____, 19__

OR, THAT ASSISTANCE BE DENIED FOR THE FOLLOWING REASON(S):

OR, THAT NO CHANGE BE MADE IN THE AMOUNT OF ASSISTANCE TOTALING $_____

OR, THAT ASSISTANCE PREVIOUSLY GRANTED BE CHANGED FROM $_____TO $_____EFFECTIVE _____, 19____, FOR THE FOLLOWING REASON(S):

OR, THAT ASSISTANCE PREVIOUSLY GRANTED IN THE AMOUNT OF $_____BE WITHDRAWN, EFFECTIVE _____, 19____, FOR THE FOLLOWING REASON(S):

IF RECOMMENDATION OF VISITOR OF COUNTY DEPARTMENT OF PUBLIC WELFARE IS NOT FOLLOWED, INDICATE REASON(S):

DATE _____, 19_____ SIGNED _____
OIRECTOR, COUNTY DEPT. PUBLIC WELFE

VI. RECOMMENDATION OF COUNTY BOARD OF PUBLIC WELFARE

THAT ASSISTANCE BE GRANTED IN THE AMOUNT OF $_____, EFFECTIVE _____, 19__

OR, THAT ASSISTANCE BE DENIED FOR THE FOLLOWING REASON(S):

OR, THAT NO CHANGE BE MADE IN THE AMOUNT OF ASSISTANCE TOTALING $_____

OR, THAT ASSISTANCE PREVIOUSLY GRANTED BE CHANGED FROM $_____TO $_____EFFECTIVE _____, 19____, FOR THE FOLLOWING REASON(S):

OR, THAT ASSISTANCE PREVIOUSLY GRANTED IN THE AMOUNT OF $_____ BE WITHDRAWN, EFFECTIVE _____, 19____, FOR THE FOLLOWING REASON(S):

IF RECOMMENDATION OF DIRECTOR OF COUNTY DEPARTMENT OF PUBLIC WELFARE IS NOT FOLLOWED, INDICATE REASON(S):

DATE _____, 19_____ SIGNED _____
PRESIDING OFFICER OF THE BOARD

SECTION 7

NARRATIVE RECORDING

I. GENERAL COMMENTS

Two forms of narrative recording are in common use: chronological and topical. In chronological recording all entries are made according to the date on which the contact occurred. In topical recording several contacts may be combined under topical headings, which describe the content of the paragraph. A combination of these two methods is suggested as the most suitable and convenient for blind assistance records, since contacts are likely to be comparatively infrequent, but comprehensive. The intake interview will usually be a chronological entry. If the information obtained is very complete, the organization of the material will be facilitated by arranging it under topical headings. The initial study which includes contacts with other agencies, the home interview, and verifications, will necessarily be the result of numerous contacts with the applicant as well as other persons. With the possible exception of some types of verifications which may require correspondence, and may, therefore, be delayed, this material should not be recorded until it is complete, and then arranged according to marginal headings, with the date of the contact indicated in the narrative itself. Contacts made subsequent to those in the initial study will be recorded chronologically. Reinvestigations may be recorded in topical form, but in the majority of cases, the information will not be sufficiently comprehensive to make this necessary or even desirable.

A. DIRECTIONS FOR TYPING

All recording should be typewritten on 8½ x 11 inch paper of sufficient thickness and durability that both sides may be used. A margin of one and one-half to two inches should be allowed on the left hand side of the page for marginal headings in topical recording and for the date in chronological recording. All entries should be followed by the name of the visitor and the initials of the stenographer. Typing should be single spaced with double spaces allowed between paragraphs. The first line of each paragraph should be even with the margin, not indented. Each page should be numbered and the surname and case number of the applicant should be typed on the front side of each page for identification.

B. GENERAL DICTATION INSTRUCTIONS

The person dictating should always use the third person, singular, referring to himself as the visitor, which may be indicated by the capital letter V. To prevent unnecessary repetition and to shorten the recording, the name of the applicant or recipient may be abbreviated. Example (Mr. R. or Mrs. W.). Reference should be made to other persons mentioned by name and relationship. Example (John Davis, nephew of Mr. R.), (Mary Brown, former employer of Mrs. W.).

It is preferable to use the past tense in dictating the narrative inasmuch as the facts being recorded were obtained prior to the time of dictation. However, it is proper to use the present tense to denote a continuing action or situation.

The first sentence of the report of an interview should give the name and address of the person being interviewed and the purpose of the interview. If the applicant or recipient is the person interviewed, the address need not be given.

The visitor necessarily has a wide range of material from which to select in compiling a case record. The attempt to record clearly, and at the same time concisely, frequently makes this selection difficult. The following suggestions may be helpful when the visitor is faced with this problem.

It may appear at the time material is obtained that it has no value and does not belong in the case record, but this material should be discarded only with careful consideration because it may have significance after future developments. Then, too, the source of information by which this material was made available may not be accessible at a later date.

It is necessary at all times for visitors to be objective in the selection of material for recording. Personal opinions have no place in the case record and if the visitor does feel that it is necessary to record an impression, the impression should be substantiated by a statement of the incident or information responsible for its formation.

Clarity in regard to meaning is essential, because over a period of years the material recorded may be used by many different visitors.

Accuracy must also be considered from the standpoint of its two possibilities. A statement may be either a correct reproduction or it may be a statement of absolute correctness. The latter degree of accuracy is, of course, the one which must be attained in public welfare records. There may be occasions, however, when it seems desirable to reproduce a statement, the accuracy of which is not known. This is permissible, if the source and the possibility for inaccuracy are made clear.

Recording should be a presentation of facts learned which the visitor and supervisor will later evaluate, taking into consideration the requirements of the program, and in this manner attain an unprejudiced decision. This cannot be done, if the visitor begins the recording with the outcome in mind, for in this event, the evidence will be presented so as to point logically to the conclusion previously determined.

No definite statement can be made in regard to the recording of material which is essentially confidential in nature, but the primary consideration should always be the best interests of the applicant or recipient, and with this in mind the visitor will usually arrive at the correct decision.

For an example of narrative recording, see the case record in the Child Welfare Handbook of the Children's Division.

Below is a summary outline of the suggested material to be included in blind assistance narrative records. The recording of this material is described in more detail in the paragraphs following the summary.

APPLICATION INTERVIEW

The application interview will be recorded chronologically and may cover such points as the following: date, method of application, statement of applicant's needs, present financial status, any facts obtained pertaining to eligibility, attitude of applicant, interviewer's decision in regard to further action, arrangements made relative to appointment for eye examination.

INITIAL STUDY

The initial study will be recorded topically after a decision has been reached in regard to the applicant's eligibility, and will include a summary of the information obtained from other agencies, a report of the home interview and collateral contacts, and a section dealing with the procedures followed by the visitor and the conclusions reached in verifying the various phases of eligibility.

Other Agencies

Facts to be recorded here include the name of the agency which has known the applicant, dates of contact, type of service rendered, and present plans if the agency is still actively interested in the applicant.

Neighborhood and Home

Significant facts in regard to the physical aspects of the home and any less tangible features which may affect the welfare of the applicant should be recorded here.

Family Group

Pertinent information concerning members of the household, and children and other relatives of the applicant will be recorded here. The essential facts to be obtained include: employment, health, economic situation, and degree of interest in applicant.

Friends

Record here information concerning the extent of interest which friends may have in the applicant and their ability and willingness to be of assistance.

Health

This paragraph should be concerned only with the health of the applicant and should include medical history, present state of health, the applicant's attitude toward his physical condition, and possibility of eye treatment.

Employment

Employment history of the applicant is to be recorded, including information about regular trades, length of time employed in various jobs, type of job which was most satisfactory, earnings, and length of time since last employed. Information about present employment should include name of employer, type of work, regularity of employment, earnings, and suitability of tasks to physical condition of applicant.

Economic Situation

Under this topic will be recorded information given on the face sheet concerning insurance, real estate, personal property, bank accounts; also a report of the methods used to verify needs and resources as indicated on the Budget and Recommendation Form, DPW Form 5A (Revised). Information concerning debts may also be added.

Verifications

Record procedures followed by the visitor and the conclusions reached in regard to verification of the following eligibility items: degree of blindness, age, citizenship, state and county residence, need, and assignment of property.

RECOMMENDATION AND PLAN

Visitor's explanation of his decision to reject the application or his analysis of the situation and plans for the recipient if an award is recommended, should be recorded here.

SUBSEQUENT CONTACTS

Chronological entries recording board action, referral to letters, telephone calls, and other contacts will be added as they are made.

REINVESTIGATION

Chronological or topical entries will be made from time to time, recording complete reinvestigation of the recipient's continued eligibility for assistance, particularly on the basis of need. Particular emphasis should be given to changes in living arrangements, circumstances of responsible relatives, and employment or other resources of the recipient.

II. APPLICATION INTERVIEW

The application interview will usually result in one of three procedures: (1) The application is accepted for further investigation, (2) no formal application is filed, (3) the applicant is referred to the agency which can offer the service or assistance of which he appears to be in need.

It is impossible to suggest a definite outline for use in the recording of the intake interview, because it depends largely on material as presented by the applicant and the conditions under which the interview is held, but in general the following points will be covered, and recorded immediately.

1. Date of application interview.
2. Persons accompanying or referring the applicant.
3. Statement by applicant in regard to present needs.
4. Financial arrangements prior to application.
5. Information obtained in interviewer's preliminary attempt to establish eligibility. Facts apparent on the application form should not be repeated, but should be amplified.
6. Questions of applicant in regard to the program and resulting interpretation by interviewer.
7. Attitude of applicant toward the program and toward his own circumstances.
8. Any part of the information suggested by the outline for the Initial Study, which the interviewer may obtain during the application interview. (See Chapter II, Section 7, Item III, "Initial Study").
9. Conclusion reached in regard to agency's future contacts; that is, what action the interviewer has permitted the applicant to anticipate on the part of the agency.

If the applicant has been assisted by the agency previously, or has applied previously and had been found to be ineligible, the recording of the present application interview will necessarily supplement the information which is already a matter of record. When this is the situation, it is essential that the change in circumstances which makes the application acceptable at this time be clearly stated.

III. INITIAL STUDY

A. OTHER AGENCIES

The location in the narrative for information received from other agencies is debatable, and the preference of visitors will vary in this respect. Usually, however, this entry should appear either at the beginning or the end of the home interview. In reading the record, the sequence of events will probably be clearer, if this entry is placed before the home interview, because the facts recorded took place prior to the interview itself. Information should include name of the agency, dates of contact, and type of service rendered. If the agency is still actively interested in the case, its present plans for the applicant

should be indicated. Historical data to be recorded in the home interview should not be repeated here, unless there are discrepancies which need explanation.

B. RECORDING OF INITIAL INTERVIEWS

Much of the following information may be recorded as part of the application interview. In general, it represents the facts which should be known prior to the recommendation by the visitor. The topical headings should be considered a guide and not a limitation. If pertinent information is obtained which is not related to any of the suggested marginal headings, it may be inserted in any location which seems desirable, and, if it would be helpful, a new heading may be originated. The first paragraph of this dictation needs no heading, but should give the date or dates of interviews included in the summary dictation, place of interviews, and those present at each interview. Example:

> Summary: From 1-12-38 to 1-28-38. 1-12-38--Home visit with Mr. M. and his wife. 1-13-38--Interview with John Matthews, son of Mr. M., at his office. 1-15-38--Interview with Julia Gray, daughter of Mr. M., in her home. 1-17-38--Interview with Mr. M. in the county office. 1-21-38--Called on Dr. Moore, Mr. M's physician, in his office. 1-28-38--Home visit with Mr. M.

1. Neighborhood and Home

Information pertaining to the type of neighborhood; that is, industrial, rural, rooming house district, residential, etc., will be recorded here. Significant facts in regard to the physical aspects of the home should include information concerning whether or not it is a multiple or single dwelling, number of rooms, sanitary conveniences, sleeping facilities, light and heating equipment, ventilation, yard and garden space, cooking arrangements, and source of water supply. Interest in the home as indicated by the state of repair, cleanliness, and evidence of good taste or culture should be recorded. There may be value in indicating at this point how the applicant feels about his present living arrangements; that is, how they compare with his previous standards. If the applicant is residing in an institution, but plans to move when assistance is granted, information should be given here in regard to his anticipated living arrangements.

2. Family Group

This part of the dictation should be divided into four principal divisions: information regarding relatives who are members of the immediate household, persons who live as a part of the family group, but are not related to the applicant, children of the applicant who are not members of the household, and relatives, who are not members of the household, but who have some moral responsibility for the

applicant or have given evidence of interest in his circumstances. Face sheet information should not be repeated in regard to any of these persons.

a. Facts which would be significant concerning relatives who are members of the immediate household would include information about the occupations and earnings of each employed person, and how much of their earnings are contributed to the household expenses. If any of these persons have unusual expenses or have incurred debts which must be met, these should be indicated. Data in regard to health situations, that is, communicable diseases, or any condition which necessitates special care, or unusual monetary expenditure, would be important from the standpoint of living arrangements for the applicant, his own health condition, and income available for his care. It is essential to record information which will indicate the attitudes of members of the family toward one another and particularly toward the applicant, as well as the applicant's attitude toward them. Significant attitudes noticed in discussion of finances and budget problems of the family should be recorded. Particular attention should be given to the manner in which the family group has reacted to the applicant's blindness. Have they attempted to help him gain independence or have they waited upon him to the extent that his training in this respect has been neglected? Explain what responsibility, if any, the applicant has for the members of the family.

b. The particular situation in the case being recorded will determine the type of information desired in regard to those persons who are members of the household, but not related to the applicant. It will usually be important to know the reason for his position as a member of the family group, his contribution to the household expenses, and his health condition, if it could in any way affect the applicant.

c. In the discussion of the applicant's children, it may be convenient to record any facts in regard to marital history which might have bearing on eligibility from the standpoint of citizenship. If the applicant has no children, such facts, if important, may be better recorded as a part of "Verifications". (See Chapter II, Section 7, Item III c "Verifications"). This should also include material pertaining to the number of marriages, reasons for termination of marriages, number of children by each marriage, and the responsibility assumed by the applicant for his children. This information will assist in clarifying difficulties which may arise in regard to the amount of responsibility which children may be expected to assume. Additional information concerning children of the applicant would include present occupation and income, number of dependents, expenses and debts, amount and type of assistance which

they have given applicant in the past or which they are giving him at the present time, and their attitude toward this parent.

d. It is valuable to obtain the same type of information in regard to relatives living outside the home as has been suggested for members of the household. In respect to relatives who are only morally responsible or interested, however, it would be helpful to explain in detail in what manner this interest has been displayed. It may be that they have been particularly interested in the health of the applicant and could be relied upon to take care of any emergency resulting from sickness. They may be willing to provide clothing or to take some responsibility in regard to planning recreation. Such evidence concerning type of interest may be helpful when emergencies arise at a later date which cannot be anticipated at the time of recording.

3. Friends

Very frequently the younger applicants for blind assistance and often the older ones, will have close associations with other blind persons. This relationship is often the result of contacts at the State School for the Blind, the Board of Industrial Aid for the Blind or some social organization. These friends of long standing may have considerable interest in the applicant, and could be helpful, not only in making plans for him, but as a source of verification, if needed. If the applicant refers to such friends, information should be recorded in respect to the extent of their interest, and their ability and willingness to be of assistance.

4. Health

Information should be recorded in regard to diagnosis, prognosis, past or present medical care, including name and address of clinic, hospital or private physician caring for the applicant, and recommendations of the foregoing in regard to future care, which may include a special consideration in the award for housing arrangements suitable to the applicant's condition. The applicant's attitude toward his physical condition is particularly important, from the standpoint of the amount of cooperation which the visitor may anticipate in working out a treatment plan. This information should include facts about the general health condition of the applicant as well as specific information concerned with his blindness. This would include whether the applicant is totally or partially blind, and whether or not he can see to read, to get about without a guide, to recognize persons and objects.

5. Employment

This paragraph should be concerned only with the employment history of the applicant himself. As a possible resource this information

will rarely have significance for the blind applicant, but it will often be of assistance in understanding his problems on a service basis, and should be recorded with this in mind.

Some of the essential facts in regard to employment are as follows: regular trade prior to loss of eyesight, length of time employed in various jobs, type of job which applicant found most satisfactory, earnings, length of time since last employed, type of work learned since loss of sight, degree of success attained in this work, reaction to present inability to be financially independent, and expression of interest in any type of work available for blind persons. If employed at the time of application, information should include name of employer, type of work, regularity of employment, amount of earnings, and suitability of tasks to the condition of the applicant.

6. Economic Situation

It is essential that the data pertaining to the economic situation be exact and accurate in every detail. It would probably be advisable not to record this information until suitable verifications have been made. It is not necessary to repeat here the facts in regard to expenditures and income since these will necessarily be available from the Budget and Recommendation Form, DPW Form 5A (Revised), but reference should be made to the method used to verify these items. To prevent duplication of effort by another worker, it is advisable to record here the procedure followed by the visitor in determining this phase of eligibility, even though the results were not significant. It may be necessary, also to amplify in this paragraph face sheet information concerning insurance, real estate, personal property, bank accounts, and property which may have been transferred. Facts concerning debts are also important. Information should include name, and address of creditor, nature of debts, balance due, and length of time since last payment.

C. VERIFICATIONS

1. Age

If the verification of age is necessary the narrative record should contain a complete account of the visitor's activity in connection with the verification of age. A number of the sources through which verification is attempted may prove unsuccessful, but a complete report of these contacts needs to be recorded to prevent duplication of effort on the part of another visitor, if, at some future time, there should be reason to doubt the reliability of the source used to establish eligibility. The source and its location, which is used as a basis of age eligibility should be included in the narrative record as well as on the "Statement of Verifications", DPW Form 5 (Revised).

Particular attention needs to be paid to the method of recording identifying information as to where the source utilized is located. A statement as to the location of the source of verification may be very important to someone subsequently making a check of the record, or to a new visitor, especially where the person making the check is not entirely familiar with county records.

To state in the narrative record that the family Bible was utilized to verify the age of the applicant sets forth the source but no information as to where this Bible may be found. For example, if an individual's age has been verified by use of the family Bible, a statement something as follows should be entered in the record: "Age was verified from a list of birth dates given on pages 6 and 7 in the family Bible which is in the possession of Mary Jones, sister of the applicant, who lives at 441 Jackson Street, Indianapolis, Indiana", or "Age was verified by marriage record located in the office of the County Clerk of Marion County in Book 154, page 16, line 10".

2. Citizenship

As has been indicated in the "Recording of Initial Interviews", there may be situations in which information concerned with verifications of citizenship has a logical position in some part of the narrative record, such as the discussion of the applicant's marriages and children. When, however, these facts seem disassociated from other record material, and are obtained only for the purpose of verification, then the visitor's activity in this respect should be indicated as part of this section. These facts, wherever recorded, may include information concerning the visitor's attempts to verify place of birth, dates of marriages to aliens, dates when such marriages were terminated, and date and place of naturalization. The source of verification utilized and its location should be included in the narrative record as well as on the Statement of Verifications, DPW Form 5 (Revised).

A general statement that the applicant is a citizen is not sufficient, since the method used to confirm the correctness of the statement should be contained in the record. Illustrations of more adequate recording are as follows: "Citizenship was verified through naturalization papers in possession of applicant showing that certificate of naturalization was issued November 7, 1915, by the Federal Court in Indianapolis", or "Citizenship certified through the records of the Clerk of the Federal Court located in the Federal Building in Indianapolis".

3. Residence Requirement

Complete information should be recorded concerning activity on the part of the visitor to verify that the applicant meets the residence

requirement. As in the case of age and citizenship verifications, this should include those attempts which were unsuccessful as well as the ones utilized, to prevent duplication of effort at some future time. Facts concerning the source and the location of the source used will be recorded on the "Statement of Verifications", DPW Form 5 (Revised), but should be repeated in the narrative record, together with any information which is necessary to supplement the statement on DPW Form 5 (Revised).

In recording information concerning residence verifications, care must be taken to be specific in regard to the period of time for which residence was verified, and the location of the residence verified, as well as the location of the source itself. For example: "Residence from April 1, 1934 through July 31, 1935, at 906 Kelly Street, Indianapolis, Indiana, was verified by record of rental payments by the applicant for the months indicated. This record is located in the office of Jones & Brown, Realtors, 205 State Street, Indianapolis, Indiana".

4. Need

Facts concerning eligibility on the basis of need will necessarily be recorded in other parts of the narrative record, (Family Group, Friends, Employment, Economic Situation) and summarized on the Budget and Recommendation Form, DPW Form 5A(Revised), so that they need not be repeated here.

5. Assignment of Property

Facts concerning assignment, transfer, or sale of property properly belong in the paragraph of the narrative record which is concerned with the "Economic Situation", and need not be repeated here. Essential facts concerning the transaction will also be recorded on DPW Form 5 (Revised).

6. Loss of Eyesight While a Resident of this State

If the applicant's eligibility on the basis of residence is determined in accord with Section 52, subsection "3" of The Welfare Act of 1936, the visitor should record all of the procedures followed to establish this eligibility. These will include not only the actual steps taken to establish residence on a certain date but also medical evidence verifying that blindness occurred on the date in question.

7. Is Not Soliciting Alms

Visitor should record here all information available concerning this question, indicating on what basis a conclusion was reached as to whether or not the applicant satisfies this particular eligibility requirement.

IV. RECOMMENDATION AND PLAN

The visitor's recommendation in regard to the award will be recorded on the budget sheet, but any needed explanation, as for example, to explain variations from the county's Budget Guide should be recorded under the heading, Recommendation and Plan. If the visitor's decision has been to reject the application, a complete explanation of the basis for rejection should be recorded here. When the decision has been to grant an award, the visitor should record here service plans for the recipient and recommendations in regard to future contacts. This should not be used as a mechanical device, for recording visits, for example, which the visitor intends to make in the future, but should be used by the visitor to make a brief analysis of the situation, together with his own thinking in regard to the needs of the recipient and how they can best be met. Such recording does not permanently commit the visitor to the original analysis which he makes, but does necessitate some thought being given to the situation beyond the establishment of eligibility. If at a later contact, the visitor changes his thinking about the situation, he may make a new recommendation and outline a new plan, giving the reasons for the change. These plans might include health programs, the building up of a better relationship with a relative with some purpose in view in regard to a method by which he might be helpful to the recipient, better housing arrangements, or a different financial adjustment.

V. SUBSEQUENT CONTACTS

Following the recommendation of the visitor for the granting of an award, there may be various kinds of activity which affect the recipient and which should be a matter of record as chronological entries. Among these are action taken by the county and the state boards. Following the date on which the action took place, there should be a reference to the certificate filed in the case record.

Frequently the recipient or an interested person will write to the county office. These letters should usually be retained or copies made of them and filed with other correspondence in the case record. The narrative record should indicate the date on which the letter was received by the county office, and an entry should follow referring the reader to the letter which is filed with the correspondence. Example: 2-3-38--See complaint letter from Mr. N. dated 2-1-38. Outgoing as well as incoming correspondence should be recorded by the same method.

If the recipient of his own accord should visit or telephone the county office, the reason for his visit and any action taken should be recorded by the person who talks with him whether it is the visitor responsible for the case, the supervisor, or the county director. Information or inquiries from persons other than the recipient should be recorded in the same manner.

Frequently the visitor may have reason to contact the recipient for a specific purpose, but the visit will in no way constitute a reinvestigation. Chronological entries should be made explaining the purpose and the result of the interview.

VI. REINVESTIGATIONS

The recording of complete periodic reinvestigations may be chronological or topical depending largely on the type and amount of information obtained.

The recorded material should include sufficient facts to indicate whether or not the recipient is still eligible, particularly on the basis of need. Any changes in the situation which would necessitate a change in the amount of the award should be stated clearly, as well as changed needs on a service basis.

Changes in the recipient's residence should be carefully noted, together with changes in the actual living arrangements, since these will many times affect the actual needs of the recipient. Information concerning responsible relatives should be recorded in the reinvestigation, indicating any changes in their circumstances since the last contact which may have bearing on the recipient's situation. If the recipient is employed, current information concerning the present status of his employment should be recorded. Any changes occurring since the initial study or the previous reinvestigation regarding real estate, personal property, debts, insurance, or other compensation, should be indicated in the narrative.

If the reinvestigation indicates the need of refiguring the budget, it may likewise be necessary to include in the recording, as part of the new Recommendation and Plan, an explanation of the budget changes made. As has been indicated under Item IV Recommendation and Plan, the visitor, following a reinvestigation may wish to indicate in the narrative some revisions of his original analysis and corresponding revisions of his plans.

CHAPTER III

AWARDS

Section 1. Awards

I. General Statement

II. Recommendation of Director

A. Instances in Which Recommendation of County Board is Required.

B. Instances in Which Recommendation of Director Only is Required.

C. Instances in Which Recommendation of County Board or of Director is Not Required.

D. Instructions for Filling Out DPW Form 17.

E. Review by State Department Use of SDPW Form 1217 (Revised)

F. Action by State Board

G. Routing of Certificates of Award, Rejection Change of Award, and Withdrawal in County Office.

CHAPTER III

SECTION 1

AWARDS

I. GENERAL STATEMENT

The award procedure in the administration of blind assistance is primarily the responsibility of the state department. County departments do not make the final decision on the granting of awards in blind cases; their responsibility being the taking of applications, the completion of investigations, and the making of recommendations to the state department. The county department should organize its office routine so that little effort is lost in the procedure of making recommendations to the state department in regard to awards. The visitor's recommendation, as to whether or not the applicant is eligible for blind assistance will be made on the Budget and Recommendation Form, DPW 5A (Revised). (See Chapter II, section 6 for preparation of DPW Form 5A (Revised). DPW Form 5A (Revised) placed in the case folder will be made available to the director for his approval. In counties where there is a case work supervisor the visitor's recommendation should go to the case work supervisor and then to the director. The subsequent director and board action on recommendations of awards, changes of awards, rejections and withdrawals, reviews by the state department representative and final approval by the state board completes the award procedure as discussed in this chapter.

II. RECOMMENDATION OF DIRECTOR

The county director after study of the visitor's recommendation will make his final conclusion as to the eligibility of the applicant and the amount of assistance to be recommended to the county board. If the director changes the recommendation of the visitor he should discuss such changes with the visitor and he shall record on DPW Form 5A (Revised) the factual reasons for the change in the visitor's recommendation. If the visitor and director know the rules and regulations and procedures established by the state department the recommendation of the visitor and the director should in most cases be the same.

Because of the time element involved, the state department will accept the recommendation of the county director in certain instances rather than to wait for another meeting of the county board. For the purpose of explaining the procedure, the appropriate form of action in the different types of situations is outlined in items A, B and C below.

A. RECOMMENDATION OF COUNTY BOARD IS REQUIRED IN THE FOLLOWING INSTANCES

1. On the first recommendation to the state department following application or reapplication for assistance made on DPW Form 40 (Revised) except in cases of application for eye treatment only. (See item B-1 below).

2. On the recommendation to the state department made following all periodic reinvestigations required by the state department.

3. On the recommendation to the state department for withdrawal of blind assistance because recipient is soliciting alms.

B. IN THE FOLLOWING INSTANCES RECOMMENDATION OF COUNTY DIRECTOR ONLY IS REQUIRED. (IF A DIRECTOR DESIRES TO OBTAIN A RECOMMENDATION FROM THE COUNTY BOARD, HE MAY DO SO).

1. On recommendation regarding eligibility for eye treatment only.

2. On recommendation for a change of award or on change of recommendation prior to award, due to the obtaining of further information regarding the circumstances of a recipient or applicant as a result of investigation by the county department.

3. On recommendation for withdrawal of assistance due to the discovery of sufficient resources as a result of further investigation by the county department.

4. On recommendation for withdrawal of assistance due to removal from the state.

C. IN THE FOLLOWING INSTANCES RECOMMENDATION OF COUNTY BOARD OR DIRECTOR IS UNNECESSARY

1. Withdrawal of assistance due to:

   a. Death of recipient.

   b. Admission of recipient into a public institution.

   c. Regaining of eyesight.

   d. Discovery of sufficient resources as a result of review by the state department.

   e. Voluntary withdrawal.

   This does not relieve county directors of the responsibility of reporting to the state department any of the above conditions, which should result in a withdrawal. No formal recommendation for withdrawal is required, however.

2. Rejection of the application as a result of state department review.

3. Changes in amounts of budget items recommended for an applicant or recipient necessitated by state department review.

4. Recommendation to the state board for eye treatment for a recipient of blind assistance.

D. INSTRUCTIONS FOR USE OF DPW FORM 17

The director will make his recommendation to the county board on DPW Form 17, Recommendations of County Director of Public Welfare and Actions of the County Board of Public Welfare as to Awards, Revocations, Rejections, etc.

Instructions for use of DPW Form 17 will be found in Chapter XXXI of the Accounting Manual.

E. REVIEW BY STATE DEPARTMENT - USE OF SDPW FORM 1217 (REVISED)

Each month the director shall notify the district representative that the county board or the director, where county board action is not required, has recommended action on certain blind cases. The district representative shall proceed to make a review of all such cases.

SDPW 1217 (Revised) is the form used in the review of all blind assistance. It is to be prepared in duplicate by the member of the field staff making the review. The original will be sent to the division of public assistance by the district representative and the duplicate will be given to the county department for filing in the county case record.

No case will be reviewed until the reviewer has ascertained that all forms prescribed in the rules and regulations and applicable to the specific case being reviewed have been used in accordance with the procedures outlined in the regulations. No case will be reviewed until all information has been recorded and the case presented to the county board, if it is one requiring county board action prior to review by the state department.

F. ACTION BY STATE BOARD

The certificates of award, rejection, change of award and withdrawal shall be authorized by the state board of public welfare and will be issued by the state department. The county department will be notified of the state board's action by the receipt of the county's copies of all awards, rejections, changes of award and withdrawals issued.

G. ROUTING OF CERTIFICATES OF AWARD, REJECTION, CHANGE OF AWARD AND WITHDRAWAL IN COUNTY OFFICE

When notification of a rejection, award or withdrawal is received by the county department it shall be entered in the Register of Applications for Blind Assistance, DPW Form 2B (Revised). In case of an award the county department will want to inform other agencies which have been interested in the case that an award has been granted. DPW Form 16, Notice to

Township Trustee, is provided for the purpose of notifying the trustee and is discussed in Chapter IV, Section 2 of this manual.

The certificate will be returned to the visitor having the case for entry on the desk card and in the narrative record. The visitor will have the forms filed in the case folder.

No case will be reviewed until the reviewer has ascertained that all forms prescribed in the rules and regulations and applicable to the specific case being reviewed have been used in accordance with the procedures outlined in the regulations. No case will be reviewed until all information has been recorded and the case presented to the county board, if it is one requiring county board action prior to review by the state department.

F. ACTION BY STATE BOARD

The certificates of award, rejection, change of award and withdrawal shall be authorized by the state board of public welfare and will be issued by the state department. The county department will be notified of the state board's action by the receipt of the county's copies of all awards, rejections, changes of award and withdrawals issued.

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When notification of a rejection, award or withdrawal is received by the county department it shall be entered in the Register of Applications for Blind Assistance, DPW Form 2B (Revised). In case of an award the county department will want to inform other agencies which have been interested in the case that an award has been granted. DPW Form 16, Notice to Township Trustee, is provided for the purpose of notifying the trustee and is discussed in Chapter IV, Section 2, of this manual.

The certificate will be returned to the visitor having the case for entry on the desk card and in the narrative record. The visitor will have the forms filed in the case folder.

Prescribed by State Department of Public Welfare
and State Board of Accounts

DPW—Form 17
10M-1-12-39
100

THE COUNTY DEPARTMENT OF PUBLIC WELFARE

OF.....COUNTY

.....INDIANA

Recommendation No. .....

Sheet No. .....

County Code No.....

Prescribed by State Department of Public Welfare
and State Board of Accounts

DPW—Form 17
10M-1-12-39
100

THE COUNTY DEPARTMENT OF PUBLIC WELFARE

OF.....COUNTY

.....INDIANA

Recommendation No. .....

Sheet No. .....

County Code No. .....

RECOMMENDATIONS OF COUNTY DIRECTOR OF PUBLIC WELFARE AND ACTION OF COUNTY BOARD OF PUBLIC WELFARE AS TO REJECTIONS, AWARDS, REVOCATIONS, ETC.

As county director of public welfare of.....County, I hereby recommend to the county board of public welfare of.....county, the action indicated in the following cases as shown on sheets numbered.....to ....., inclusive, of recommendation number.....:

(For Office Use Only)

	Application No. Type (1)	Application No. Serial (2)	Name of Applicant or Recipient (s) (3)	Recommendation of County Director: Action (4)	Recommendation of County Director: As Of (5)	Recommendation of County Director: Amount (6)	Action County Board of Welfare: Action (7)	Action County Board of Welfare: As Of (8)	Action County Board of Welfare: Amount (9)	Certificate Number or Date Notice Issued (10)
1										
2										
3										
4										
5										
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7										
8										
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10										
11										
12										
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16										
17										
18										
19										
20										

Signed.....
County Director of Public Welfare

of.....County

Date.....

Seal of Board

Sheets numbered.....to.....inclusive, of recommendation No.....considered by County Board of Public Welfare of .....County on....., 19....., and action taken by board as indicated and County director of public welfare ordered to prepare proper certificates and notices to be signed by..... .....and seal of board affixed whenever required. Proper entries have been made in the official minutes of the board of the county board of public welfare of.....County.

Signed .....President

.....Vice President

.....Member

.....Member

.....Member

INSTRUCTIONS

This form to be used by county director in recommending to board any rejection, award, change or modification of award, revocation or cancellation of award or other action requiring decision of the board.

Prepare in duplicate. Proper entry must be made in minute book as to action taken by board, referring to recommendation No.....

1. Copy submitted to board for official action and permanent record in connection with official minutes of board.
2. Copy to State Department Welfare properly signed and sealed.

RECOMMENDATION FOLLOWING REVIEW OF BLIND ASSISTANCE CASE

SDPW 1217 (REVISED)

DATE OF REVIEW _____ COUNTY _____ APPLICATION NO. B. ____ (CODE) _____ (SERIAL)

NAME _____ (SURNAME) (FIRST) (MIDDLE)

ADDRESS _____ (STREET) (CITY) c/o _____

IS ABOVE ADDRESS THE SAME AS THAT GIVEN ON THE MOST RECENT CERTIFICATE? _____

NAME OF GUARDIAN _____ ADDRESS _____

CLASSIFICATION AT TIME OF REVIEW					
APPLICANT		MONTHLY ASSISTANCE		EYE TREATMENT	
RECIPIENT		MOST RECENT CERTIFICATE NUMBER		AMOUNT	DATE OF MOST RECENT CERTIFICATE
		BI NO.			
		BC NO.			

RECOMMENDATION	AMOUNT	IF REJECTION OR WITHDRAWAL, INDICATE REASON	EFFECTIVE DATE	IS EYE TREATMENT RECOMMENDED:
COUNTY DEPARTMENT				BY STATE
REVIEWER				1. SUPERVISING OPHTHALMOLOGIST YES__ NO__
				2. BY COUNTY DEPARTMENT YES__ NO__
				3. BY DISTRICT REPRESENTATIVE YES__ NO__

IF REVIEWER DOES NOT CONCUR IN RECOMMENDATION OF COUNTY DEPARTMENT, STATE REASONS SPECIFICALLY: _____

PREPARE IN DUPLICATE:
1. DIVISION OF PUBLIC ASSISTANCE
2. COUNTY DEPARTMENT

P-2544A-9-13-38

_____ SIGNATURE OF DISTRICT REPRESENTATIVE

Prescribed by State Department of Public Welfare
and State Board of Accounts

DPW Form 52 (Revised)
3M—1-12-39

Certificate No. BA.....

Application No. B-.....
Code Serial

THE STATE DEPARTMENT OF PUBLIC WELFARE

STATE OF INDIANA

CERTIFICATE OF AWARD FOR ASSISTANCE TO THE BLIND

Date....., 19.....

An application having been filed, investigation made and eligibility and amount of assistance determined, as required by law, The State Department of Public Welfare, State of Indiana, by authority of the State Board of Public Welfare has awarded to

.....
First Middle Last Name

Residence ....., Indiana
Street City or Town County

Assistance to the Blind in the amount of $.....per month under the provisions of The Welfare Act of 1936 as amended and subject to all the conditions and requirements thereof and any rules and regulations issued thereunder and including the right of revocation and modification, such assistance to be

granted in the first instance for the calendar month beginning the first day of....., 19.....

Notice to recipient: Checks for assistance will ordinarily be received shortly after the beginning of the calendar month for which assistance is granted.

(SEAL)

Signed by order of the Board

.....
Administrator State Department of Public Welfare

INSTRUCTIONS

Prepare five copies each signed and sealed		Mailed or Filed
1. State Dept. Public Welfare	☐	.....19.....
2. State Auditor	☐	.....19.....
3. State Dept. Public Welfare	☐	.....19.....
4. County Dept. Public Welfare	☐	.....19.....
5. Recipient	☐	.....19.....

Prescribed by State Department of Public Welfare
and State Board of Accounts

DPW Form 51
3M—1-12-39

THE STATE DEPARTMENT OF PUBLIC WELFARE

STATE OF INDIANA

Application No. B-..... - .....
Code Serial

REJECTION OF APPLICATION FOR ASSISTANCE TO THE BLIND

Date....., 19.....

Name.....

Address.....

.....Indiana

Your application for Assistance to the Blind has been carefully reviewed by the State Department of Public Welfare. The Department by authority of the State Board of Public Welfare finds it necessary to reject your application because of the following reasons:

We realize that you will be disappointed by the decision but hope that you will understand that we are limited by the provisions of the Blind Assistance Sections of the Welfare Act of 1936, as amended.

(SEAL)

Signed by order of the Board

.....
Administrator State Department of Public Welfare

Prepare in Triplicate. Each copy signed and sealed.	Mailed or Filed
1st Copy to Applicant	☐.....19.....
2nd Copy to State Department	☐.....19.....
3rd Copy to County Department	☐.....19.....

Prescribed by State Department of Public Welfare
and State Board of Accounts

DPW Form 53
15M—5-27-36

Certificate No. BC.....

Application No. B-..... - .....
Code Serial

THE STATE DEPARTMENT OF PUBLIC WELFARE

STATE OF INDIANA

CERTIFICATE OF CHANGE OF AWARD FOR ASSISTANCE TO THE BLIND

Date....., 19.....

In accordance with the provisions of The Welfare Act of 1936 and after due investigation and determination, the State Department of Public Welfare, State of Indiana, by authority of the State Board of Public Welfare has changed the award granted to

.....
(First) (Middle) (Last)

Address .....
(Street) (City) (County)

on Certificate No. BA..... date..... ....., 19.....

from $.....per month to $.....per month, such change to be effective

for assistance granted for the calendar month beginning the first day of.....,

19.....

(SEAL)

Signed by order of the Board

.....
State Director of Public Welfare

INSTRUCTIONS

Prepare five copies each signed and sealed

		Mailed or Filed
1. County Dept. Public Welfare	☐	19.....
2. State Dept. Public Welfare	☐	19.....
3. State Dept. Public Welfare	☐	19.....
4. State Auditor	☐	19.....
5. Recipient	☐	19.....

Prescribed by State Department of Public Welfare
and Approved by State Board of Accounts

DPW Form 54
10M—11-1-39

Withdrawal Certificate No. BW.....

Application No. B-..... - .....
Code Serial

THE STATE DEPARTMENT OF PUBLIC WELFARE

STATE OF INDIANA

WITHDRAWAL OF ASSISTANCE TO THE BLIND

Date....., 19.....

Name.....

Address.....

In accordance with the provisions of The Welfare Act of 1936, as amended, after due investigation and determination the State Department of Public Welfare, by authority of the State Board of Public Welfare, has withdrawn Blind Assistance to you as of....., 19....., because of the following reasons:

(SEAL)

Signed by order of the Board

.....
Administrator State Department of Public Welfare

INSTRUCTIONS

Prepare five copies each signed and sealed

	Mailed or Filed
1. County Dept. Public Welfare	☐ .....19.....
2. State Dept. Public Welfare	☐ .....19.....
3. State Dept. Public Welfare	☐ .....19.....
4. State Auditor	☐ .....19.....
5. Recipient	☐ .....19.....

SECTION 2

SUSPENSION OF MONTHLY PAYMENTS OF ASSISTANCE TO BLIND PERSONS

I. PLAN OF SUSPENSION

When a recipient is found to be temporarily not in need of monthly cash payments but his need continues for all other services to which an otherwise eligible recipient of blind assistance is entitled under the provisions of The Welfare Act and rules and regulations of the State Department, it is possible for the county department to recommend to the State Department that assistance be suspended for a period not in excess of six months. In suspending monthly assistance, a Certificate of Change of Award for Assistance to the Blind, DPW Form 53, shall be issued in the amount of no dollars ($0.00). The county department has the option of recommending the suspension plan as opposed to withdrawing assistance, except in those cases where an otherwise eligible recipient is admitted to the county infirmary for temporary medical care, in which case the suspension plan is mandatory in accordance with Regulation 2-1002.

A. DEFINITION OF "TEMPORARILY NOT IN NEED"

Regulation 2-1003 defines "temporarily not in need" as temporary support resulting from subsistence needs of a recipient being temporarily met through short term employment, possession of limited resources, emergency or temporary hospitalization, or a visit in the home of relatives or friends. A recipient who is incarcerated in a penal institution for a short period of time, is temporarily not in need, but he has lost his eligibility for public assistance by reason of the fact that he has become a resident of a public institution for a reason other than to obtain temporary medical care. Because of this the suspension procedure shall not be used under these circumstances.

B. PROCEDURE TO BE FOLLOWED WHERE SUBSISTENCE NEEDS WILL BE MET FOR A PERIOD IN EXCESS OF SIX MONTHS

In any case where it is determined that a recipient's subsistence needs will be met for a period in excess of six months, a withdrawal of assistance should be recommended since such a plan is not to be considered temporary in accordance with the definition of "temporarily not in need" as provided in Regulation 2-1003.

C. MANDATORY USE OF SUSPENSION PLAN WHEN RECIPIENT OF BLIND ASSISTANCE IS ADMITTED TO THE COUNTY INFIRMARY FOR TEMPORARY MEDICAL CARE

When an otherwise eligible recipient of blind assistance is admitted to the county infirmary for temporary medical care, the plan of

suspension of monthly assistance payments shall be used, unless assistance is continued to the recipient during his stay in the infirmary in accordance with Regulation 2-1103. It is the responsibility of the county department to determine through investigation whether or not the illness is of a temporary nature or whether protracted care will be required. The probable duration of the illness rather than its ultimate outcome should be the determining factor in deciding whether or not the plan of suspension should be recommended. Under this plan, if the blind person dies during the suspension period, the State Department of Public Welfare will be responsible for his

burial if eligible in all other respects, rather than the county infirmary.

D. EFFECTIVE DATE OF SUSPENSION OF MONTHLY ASSISTANCE

The effective date of a suspension of payments of blind assistance shall be the first day of the month following the date of issuance of the last warrant for payment of monthly assistance which was delivered to the recipient. For example:

A recipient enters a public hospital for temporary hospital care on July 8th. He has no needs outside the institution. His last warrant was delivered to him on July 6th. His case would be presented at the July meeting of the state board with the recommendation that assistance be suspended effective August 1st. By action of the state board a DPW Form 53, Certificate of Change of Award for Assistance to the Blind, would be issued the recipient in the amount of no dollars ($0.00), effective August 1st.

E. PROCEDURE TO BE FOLLOWED FOR REINSTATEMENT OF PAYMENTS OF MONTHLY ASSISTANCE

1. Reinstatement Within the Six Months' Suspension Period

a. When monthly assistance is to be reinstated within the six months' period following the effective date of the suspension, it is unnecessary for the recipient to prepare a reapplication.

b. While in most cases it will not be necessary for the county department to make a complete reinvestigation of the recipient's case, prior to reinstatement of monthly assistance payments, redetermination of need shall be made in as much detail as the circumstances in the case warrant. In each case the budgetary needs of the recipient shall be presented to the county board on DPW Form 5A, Budget and Recommendation Form.

c. Monthly assistance shall be reinstated by recommending a change of award in the amount which the county department has determined will be sufficient to meet the recipient's needs. The effective date of reinstatement shall be the first day of the month subsequent to the one in which he again becomes eligible for monthly assistance payments. This date must be subsequent to board action.

2. Reinstatement After Termination of Six Months' Suspension Period

a. A suspension of blind assistance shall in no instance be continued for a period of time in excess of six consecutive months, and reinstatement of assistance subsequent to the termination of the six months' suspension period shall be made only after the acceptance of a reapplication.

F. PROCEDURE TO BE FOLLOWED WHERE RECIPIENT BECOMES INELIGIBLE FOR FURTHER ASSISTANCE DURING PERIOD OF SUSPENSION.

1. Where Recipient Dies

If during the period of suspension a recipient dies, a withdrawal of assistance shall be recommended effective as of the first day of the month following the date of death.

A recipient, whose death occurs during a period of suspension of monthly assistance, is eligible for payment of funeral expenses in the same manner as the recipient receiving a regular monthly grant.

2. Where Recipient Becomes Ineligible for Any Other Reason

If during the period of suspension a recipient is found to be ineligible for any assistance under the provisions of The Welfare Act, a withdrawal of assistance shall be recommended effective the first day of the month subsequent to the one in which ineligibility is discovered.

CHAPTER IV

SERVICES

Section 1. Reinvestigation

2. Relationship With Other Agencies

3. Inter-county Removals and Temporary Absence from the State

4. Case Correspondence

5. Complaints and Appeals

6. Eye Treatment

7. Re-examination of Eyesight

8. Burials

9. Notice to Person Liable for Support

10. Appointment of Responsible Person

11. Medical Information Related to the Eyes

CHAPTER IV

SECTION 1

REINVESTIGATION

The responsibility of the visitor does not end with the completion of an investigation and the granting of an award to an applicant, but continues in a triple capacity: (1) he has an obligation to the state department and to the county department, as an agent of the state department to assist in determining whether or not the recipient remains eligible to receive the award granted; (2) he has an obligation to the recipient in determining whether or not the award granted continues to meet his needs within the limitations of the program; (3) he has a responsibility for knowing that all the services available through the county department are being used to the best interest of the recipient.

The case load of each visitor within the county should be so organized that it will be possible for him to plan to reinvestigate each blind recipient under his care at least once every six months. The case record should be read thoroughly before the reinvestigation is started and particular notice taken of any verifications which may be incomplete or which may need to be redone because of changed circumstances. It will be unnecessary, of course, to discuss again material which is not subject to change. The items which should be stressed include all phases of need; such as unemployment, debts, living arrangements, health, and present circumstances of responsible relatives. The frequency with which responsible relatives should be contacted depends upon the individual situations. In making these contacts, with both recipient and relatives, the visitor should be constantly aware of the fact that the recipient may be in need of assistance which he is not receiving, as well as of the fact that he may no longer meet the eligibility requirements.

In addition to these periodic reinvestigations, it is the responsibility of the visitor to visit the recipient, whenever information comes to his attention, which would indicate a change of circumstances that might mean an additional or decreased monthly grant. These visits may be made at the request of the recipient or other interested persons, or the visitor may have a report of illness or change of address which would indicate need for a call. The county department may also be requested by the state department to revisit a blind recipient because of information received by the state department relative to the situation. In addition the county departments may be called upon to visit the blind recipients especially in those cases where eye treatment plans are being worked out. Such visits are to be made in addition to the regular periodic reinvestigation.

SECTION 2

RELATIONSHIP WITH OTHER AGENCIES

I. GENERAL STATEMENT

The county department of public welfare as a unit in the administration of blind assistance plays an important part in the establishment of a welfare program in the county. Some departments may find that they are taking their place as a new member of an already well established group of agencies which have had responsibility for carrying on welfare services in their own community. Others will find that their own organization marks the beginning of organized welfare services. In whichever position a department may find itself, their obligation to the recipients of assistance is essentially the same; namely, to provide the best service their resources permit. The term resources used in this way is not limited to financial aid, but includes services available through local, state and community agencies as well as clubs, churches and interested individuals.

If a department finds itself in the position of becoming a new member of a group of community agencies, then to a degree their problem becomes one of understanding the social plans and needs of their community and taking their place with the idea of carrying their share of the welfare work. When the organization of the department marks the first formal organization into a group whose purpose is the administration of a welfare service, that department has the added responsibility of interpreting to the community not only the department's own program but other social needs as well.

It is important that the visitor have in mind a clear picture of the total welfare services available to meet the needs of any particular person who comes to him for aid and there is no type of need that is not likely to arise somewhere among the families and individuals, with whom the visitor comes in contact. Knowledge of the resources in the community enables the visitor to help the recipient get needed social services which the county department may not be equipped to give.

In order that the available services may be effectively coordinated for the benefit of the persons needing such services, many communities have established social service exchanges through which an agency may learn if other agencies are interested in the same family. The exchange offers the machinery for securing information that will be helpful in making constructive plans for recipients and avoiding confusion and unfairness to the recipient by having more than one agency offer the same service with the resulting confusion and duplication.

Counties will find value in an agency resource file kept up-to-date and available to the visitors, which should list for the department the agencies, clubs and interested individuals, the sphere of interest of each, the way in which recipients or applicants might be referred, and the area of service covered by each. A file of community resources may be helpful not only to recipients, but also to applicants who are not eligible for assistance from the department, but who may be referred to some other agency for the help required. The fewer organizations in a community the more applications for help not related to any of the categorical aids may be expected. In order to be of the greatest service to the community, the visitor has an obligation to know of the best methods and means of meeting these problems. Visitors, however, should remember that although they may suggest an outside resource it is the applicant's or recipient's responsibility to decide whether or not he wishes to make use of it. The visitor should be able to explain the nature of other agencies' service to the applicant and to interpret to the agencies the applicant's particular need, but it is desirable that the applicant himself take the responsibility of making his own application if he is at all able to do so.

Some resources which a county department will use are state wide. These provide mainly for medical care and include the Coleman and Robert W. Long hospitals, the Veterans' hospital in Indianapolis, hospitals for the insane at Logansport, Richmond, Indianapolis, Madison and Evansville. The Board of Industrial Aid for the Blind will be of service in connection with the vocational training of the adult blind. For eligibility requirements reference should be made to the Handbook of Information on "State Institutions of Indiana" issued by the Division of Supervision of State Institutions. The resources more accessible to the county departments will be the ones most frequently used and called upon for service on behalf of applicants and recipients or their families. Those may include among others, the Township Trustee, Family Welfare Associations, Public Health Nursing organizations, established clinics, the local chapter of the Red Cross, URC, WPA, The American Legion, and service clubs, as the Rotary, Kiwanis, and Lions.

II. PROCEDURES FOR INTER-AGENCY CLEARANCE AND REFERRAL

Procedures for inter-agency clearance and referral to certain public agencies have been established by the state department for use in the county departments. The following discussion outlines such procedures.

A. NOTICE TO TOWNSHIP TRUSTEE OF ASSISTANCE GRANTED, DPW FORM 16

(See DPW Form 16, at end of Chapter IV, Section 2)

DPW Form 16, Notice to Township Trustee of Assistance Granted, should be sent to the township trustee if the recipient has been on township relief rolls, as soon as the award of assistance has been made. The notice should be prepared in duplicate, with the original copy sent to the trustee and the second copy retained in the case folder of the recipient. In filling out the form enter the type of assistance (in the

case of blind assistance enter "Blind Assistance"), the amount to be received each month and the date the first payment will be made. This will prevent a duplication of relief and will enable the trustee to adjust his assistance to the current relief need of the family, when the recipient is a member of a family group receiving aid from the township.

B. RELATIONSHIP OF COUNTY DEPARTMENT WITH UNEMPLOYMENT RELIEF COMMISSION AND INDIANA WPA RELATIVE TO PERSONS POTENTIALLY ELIGIBLE FOR EITHER WPA OR PUBLIC ASSISTANCE

1. Relationship with URC

a. General Comments

The URC as the intake and referral agency for the Work Projects Administration has direct contact with potential applicants for public assistance and with the workers of the county department of public welfare at the point where applicants of either agency may also be prospective applicants of the other. Such a situation makes it necessary that the visitors of each agency thoroughly understand and apply the policy governing this phase of the program.

In accordance with WPA employment policy any person who is receiving public assistance, or a person to whom the award is made payable, such as the eligible relative in an assistance to dependent children case, is ineligible for certification and assignment to WPA. Persons not employed on WPA who are not receiving public assistance have the right of choice as to which of the two types of aid they prefer, provided they meet the eligibility requirements of each. Three general situations may occur under the application of this WPA employment policy. These are described below, together with the specific procedures to be followed.

1.) Persons Now Receiving Blind Assistance Who Desire WPA Employment

All persons receiving blind assistance are ineligible for certification and assignment to WPA. They may not be transferred from the public assistance program to WPA and shall not be referred by the county departments to URC for certification. If at any time it is discovered that a recipient of blind assistance is working on a WPA project, this fact shall be reported immediately to the URC visitor so that his certification may be cancelled. In every such case certification shall be cancelled rather than assistance withdrawn. If assistance is given up in an attempt to obtain WPA employment, the recipient becomes ineligible for certification by URC.

In accordance with NRA regulations relating to any person in the retail public relations, or a person to whom the order is made public, such as the eligible relative in a relationship to dependent children name, in the liability for penalties and damages to NRA. Persons not employed in NRA who are not principal public contractors have the right to invoke on the merits of the true cause of any stop problem, provided they meet all liability requirements at each. This - general allegation may occur under the appeal notice of this NRA employment policy. Those are licensed below, together with the specific provisions to be followed.

1.) Persons Not Providing Blind Assistance Who Desire NRA Employment.

All persons receiving blind assistance are ineligible for employment are mentioned in NRA. They may not be interviewed from the public assistance ... ...ers to NRA who would not be ... Effective ... If an ... time it ... that a ... of blind ... In ... ... employed, ...

2.) Persons Currently Employed on WPA Who appear to be Eligible for Blind Assistance

Persons currently employed on WPA who appear to be eligible for blind assistance will not be referred to the county department for assistance, unless for some reason it becomes necessary that they be dismissed from WPA, in which case they may be referred. If such a person desires to apply for blind assistance he should be permitted to do so and the decision in his case, if he is eligible in all respects, will depend on what will be the best plan for meeting his particular needs.

3.) Persons Not Employed on WPA Who Appear to be Eligible for Blind Assistance

Persons requesting certification for WPA employment who appear to be eligible for blind assistance will be certified by the URC if eligible in all respects. At the time of their certification, however, it will be explained to them that due to quota limitations, it may be some time before they may receive a WPA assignment. Not only may quota limitations determine their assignment to WPA but the availability of WPA projects suitable for the employment of blind persons is limited and will have a bearing on their possible assignment. In the meantime, while awaiting an assignment, should these persons apply for blind assistance, county departments should explain the new policy and if the individual still wishes blind assistance, the county departments should proceed with the investigation to determine eligibility and recommend assistance if eligibility is established.

b. Provision for Clearance of Cases

A thorough clearance of cases to avoid possible duplication in the granting of public assistance to WPA employees or the assignment to WPA of persons receiving public assistance is important. In order to prevent duplication, a procedure has been worked out whereby the division of public assistance will receive each month from the division of general administration, duplicate lists, separate for each county and containing by category the name and address of each person to whom a certificate of award was issued during the month. One copy for each county will then be forwarded by the division of public assistance to URC for distribution to their local offices where clearance will be made against the certification file. If it is found that a person listed as certified or employed on WPA has received an award of assistance, the certification for WPA employment will be cancelled rather than the assistance grant withdrawn.

c. Referral to URC of Persons Potentially Eligible for Certification to WPA

It should be rmemebered that the members of the family group of the applicant or recipient, who themselves are ineligible to be included in the grant, may be referred to the URC by the visitor of the county department if there seems to be a need for employment. If any member of the family group other than the recipient is assigned to a project, the blind assistance award should not be cancelled because of the assignment, unless the income received in the family excluding the amount of the blind assistance is sufficient to meet all the needs of the family, including the needs of the applicant or recipient of assistance. The final decisions as to the eligibility of the persons referred are the responsibility of the URC staff.

d. Use of URC Form No. 112, "Request for Collateral Information from the Department of Public Welfare."

1.) Purpose of the Form

The Indiana Unemployment Relief Commission determines eligibility for WPA certification primarily on the basis of need. In order that this may be done accurately, it is desirable for the URC visitor to have available exact information concerning any public assistance being received by a member of the household of a person applying for WPA. To the end that requests from URC visitors to county departments of public welfare may be uniform, the staffs of the Unemployment Relief Commission and the State Department of Public Welfare have designed URC Form No. 112.

2.) Use of URC Form No. 112 by the URC Senior Visitor

This form will come to the county department as a request for information only as a result of the URC visitor finding that a member of the household from which an application for WPA certification has been received is receiving some monetary assistance under one of the public assistance programs administered by the county department of public welfare. It is not contemplated that this form will be used by the URC senior visitor to discover whether or not a potentially eligible person is an applicant for or recipient of assistance from the county department.

URC Form No. 112 will be prepared in triplicate by the requesting URC senior visitor. The county department from which the information is requested will receive two copies of the form. Both copies of the form should be completed and the original copy returned to the requesting senior visitor. When the form is received by the county department it will show the name and address of the person, and

probably the type of assistance which the URC visitor has found the member of the WPA applicant's household to be receiving.

3.) Preparation of Copy of DPW Form 5A, "Budget and Recommendation Form", to Accompany URC Form No. 112

In order that the URC senior visitor may know the budget items and the amounts which a recipient of public assistance is receiving, it will be necessary for the URC visitor to have available a copy of the DPW Form 5A upon which a public assistance grant is based. In all cases where the person about whom information is requested is a recipient of Blind Assistance, the county department shall attach to the copy of URC Form No. 112 and return to the URC district office a copy of the appropriate DPW Form 5A. In preparing the copy of DPW Form 5A, the county department need not copy any more of the form than that contained in Item I, "Monthly Requirements", Column B 2, and Item II, "Monthly Income", Columns B 1 and 2. A copy of Form 5A furnished the URC should also show on the reverse side the detail of Part 6 of the form which is headed, "Recommendation of County Board of Public Welfare." In every case a copy should be furnished of the most recent DPW Form 5A.

4.) Confidential Nature of Records

The use of this form will not violate any of the prohibitions laid upon the county departments in relation to the confidential nature of case records, since the persons inspecting them have been authorized by the state to do so in connection with their official duties.

2. Relationship with WPA

a. General Comments

Subsequent to certification by the URC, the Work Projects Administration is the agency which assigns workers to projects. One of the factors which must be considered in making assignments is that of relative need. In order to determine relative need, the WPA has established two categories of need, "A" and "B", based on the income of the family. Category "A" represents that group with no income and category "B" represents that group with income insufficient to meet family needs.

The Indiana Work Projects Administration is now responsible for a periodical review of the needs phase of eligibility of all persons employed on WPA. In connection with the periodical review, the WPA may ask county departments of public welfare for information on public assistance cases. In considering the in-

come in a household, WPA counts only the five basic items of food, clothing, shelter, fuel, and household.

b. Use of IWPA Form No. 1415, "Request for Collateral Information from the Department of Public Welfare"

1.) Purpose of the Form

It is desirable for the WPA field supervisor to have available exact information concerning any public assistance being received by a member of a household of a person employed on WPA. To the end that requests from WPA field supervisors to county departments of public welfare may be uniform, the staffs of the Indiana Work Projects Administration and the State Department of Public Welfare have designed IWPA Form No. 1415.

2.) Use of IWPA Form No. 1415 by WPA Field Supervisors

This form will come to the county department as a request for information only as a result of the WPA field supervisor finding that a member of the household of a WPA employee is receiving some monetary assistance under one of the public assistance programs administered by the county department of public welfare. It is not contemplated that this form will be used by the WPA field supervisor to discover whether or not a WPA employee is an applicant for or recipient of assistance from the county department.

IWPA Form No. 1415 will be prepared in triplicate by the requesting WPA field supervisor. The county department from which the information is requested will receive two copies of the form. Both copies of the form should be completed and the original copy returned to the requesting WPA field supervisor. When this form is received by the county department, it will show the name and address of the person and probably the type of assistance which the WPA field supervisor has found a member of the WPA employee's household to be receiving.

3.) Preparation of Copy of DPW Form 5A, "Budget and Recommendation Form", to Accompany IWPA Form No. 1415

In order that the WPA field supervisor may know the budget items and the amounts which the recipient of public assistance is receiving, it will be necessary for the WPA field supervisor to have available a copy of the DPW Form 5A upon which a public assistance grant is based. In all cases where the person about whom information is requested is a recipient of Blind Assistance, the county department shall attach to the copy of IWPA Form No. 1415 and return to the WPA field supervisor a copy of the appropriate DPW

Form 5A. In preparing a copy of DPW Form 5A, the county department need not copy any more of the form than that contained in Item I, "Monthly Requirements", Column B 2, and Item II, "Monthly Income", Columns B 1 and 2. A copy of Form 5A furnished the field supervisor should also show on the reverse side the detail of Part 6 of the form which is headed, "Recommendation of County Board of Public Welfare." In every case a copy should be furnished of the most recent DPW Form 5A.

4.) Confidential Nature of Records

The use of this form will not violate any prohibitions laid upon the county departments in relation to the confidential nature of case records, since the persons inspecting them have been authorized to do so by the United States in connection with their official duties.

C. NATIONAL YOUTH ADMINISTRATION

The National Youth Administration program is designed primarily to offer further training and guidance to youths through employment on special projects.

Youth eligible for such a program must be between the ages of 17 and 25, single, a citizen, or else have declared their intention of becoming a citizen, and in need of employment, work experience and training.

The work period consists of 60 hours per month and wages received will total $18.00 in the majority of cases. A few of the older workers who are classified as project foremen receive $24.00 a month.

Youths referred by the county department will probably be members of a family receiving assistance through the county department, but the county department may refer any youth who makes inquiry concerning NYA employment at the office of the county department. The resources available to a family through the employment of a youth member on an NYA project should be considered an important one not only because of the additional income made available, thus perhaps eliminating need for aid by the Township Trustee or the county welfare department and therefore avoiding having two agencies offering supervision in the same home, but also because of the value to the youth referred and assigned in the training and work experience obtained through project employment.

Responsibility for determining the eligibility of an applicant youth for NYA employment is that of the Employment Division of National Youth Administration. Any youth whom the county department wishes to refer for NYA employment or any youth who indicates a desire to apply should be referred by the county department to NYA.

1. NYA Referral Procedure, INYA Form 301-R

(See INYA Form 301-R at end of Chapter IV, Section 2.)

INYA Form 301-R, Agency Referral for NYA Certification, shall be used by the county departments in referring youth to the NYA Employment Division for consideration. These forms are to be made out in duplicate and the original should be sent to the NYA project supervisor in the county, or if there is no project supervisor in the county in which the county department is located, the referral form should be sent to the district NYA supervisor. The location of the district supervisor's offices, the counties served by each, and their addresses are given below:

District I - 425 S. Chapin Street, South Bend, Indiana

Dekalb	Kosciusko	LaPorte	Noble	Starke
Elkhart	LaGrange	Marshall	Porter	Steuben
Fulton	Lake	Newton	Pulaski	St. Joseph
Jasper				

District II - 514 Wayne-Pharmacal Building, Fort Wayne, Indiana

Adams	Grant	Howard	Miami	Wayne
Allen	Hamilton	Huntington	Randolph	Wells
Blackford	Hancock	Jay	Tipton	Whitley
Delaware	Henry	Madison	Wabash	

District III - 272 Century Building, Indianapolis, Indiana

Benton	Clay	Marion	Parke	Vigo
Boone	Clinton	Montgomery	Putnam	Warren
Carroll	Fountain	Morgan	Tippecanoe	White
Cass	Hendricks	Owen	Vermillion	

District IV - 507-9 Elsby Building, New Albany, Indiana

Bartholomew	Fayette	Jackson	Ohio	Shelby
Brown	Floyd	Jefferson	Ripley	Switzerland
Clark	Franklin	Jennings	Rush	Union
Dearborn	Harrison	Johnson	Scott	Washington
Decatur				

District V - 110 N. Wabash Avenue, Evansville, Indiana

Crawford	Greene	Monroe	Pike	Sullivan
Daviess	Knox	Orange	Posey	Vandorburgh
Dubois	Lawrence	Perry	Spencer	Warrick
Gibson	Martin			

The duplicate of the form should be retained in the case folder of the county department.

2. Report on NYA Referral

When the application of a youth referred is acted upon, a report of that action will be made by the NYA representative to the referring agency by filling in the lower half of INYA Form 301-R and returning it to the referring agency.

D. THE CIVILIAN CONSERVATION CORPS

The selection of eligible enrollees for the Civilian Conservation Corps was assumed by the county departments of public welfare on July 28, 1939. The requirements which must be met by a youth wishing to enroll in the Civilian Conservation Corps are given in the CCC Selection Manual.

E. THE BOARD OF INDUSTRIAL AID FOR THE BLIND

The general purpose of the Board of Industrial Aid for the Blind is to ameliorate the conditions of the adult blind residing in Indiana. The vocational, recreational and adjustment services of the Board are available to any blind person 21 years of age or over who may benefit by such services.

To provide for vocational training, a practical education along industrial lines as well as a limited amount of remunerative employment is given to aid such persons in becoming economically independent. The women are given employment mostly in their own homes through needlework, crocheting, weaving, etc. A workshop is maintained in Indianapolis for the purpose of giving vocational instruction and employment to both men and women, but the employment opportunities for women in the workshop are very limited. Employment in the shop is limited by the fact that it is only accessible to the blind living in Indianapolis and the production of the shop is limited by the demand for the articles made.

The shop is equipped to manufacture brooms of all types, to make any kind of garment or do any type of sewing by power machines, to cane and repair chairs, to prepare goods for use by those working in their homes and to inspect and prepare for sale, goods produced in the homes and returned to the Board for sale. They are also equipped to give instruction in basket weaving, rug weaving, typing, chair caning, tennis racket restringing, telephone switchboard operating and leather tooling. A field department is also maintained to give instruction and supervision t to blind persons in their homes. The operation of home industries for the blind women particularly, provides a way to use their leisure time profitably, but the financial returns are so small that a living can scarcely be made in this way. A factor operating against the sucess of a home industry of a blind man or woman is the amount of sighted supervision available without cost.

Recreational opportunities are provided through the distribution of talking books and the making of handicrafts. Adjustment services carried out by the field staff of the Board, attempt to help the blind person become a more adequate person in spite of his disability, through suggestions and help in learning to feed and dress himself, and to help him become as self-sufficient as is possible with his degree of disability.

For persons desiring instruction or admission into any department of the Board of Industrial Aid for the Blind, the prescribed application form must be filled out. This is obtainable from the Board headquarters at 536 W. 30th Street, Indianapolis. A report may also be made to the Board on persons appearing able to benefit by their services, by the person making the review of the application and investigation for the state department on the form "Report to Board of Industrial Aid for the Blind." (See copy of form at end of Chapter IV, Section 2)

F. DIVISION OF VOCATIONAL EDUCATION OF THE DEPARTMENT OF PUBLIC INSTRUCTION

The Division of Vocational Education of the Department of Public Instruction might prove helpful in training a blind person to become self-supporting. This department under the supervision of the state department of public instruction provides vocational training to those who are physically handicapped and susceptible to training. It is recognized that factors such as age, degree of physical disability, attitude of mind or social status sometimes makes it inadvisable or uneconomical to attempt to give vocational rehabilitation service or impossible to accomplish it. Each application for service is determined on the merits of the case. Rehabilitation will be determined on the basis of probability of employment. Rehabilitation programs for the blind have been difficult to work out and slow in getting under way because of poor employment opportunities in Indiana. Any person is

eligible who is over 16 years of age, who by reason of physical defect or infirmity whether congenital or acquired by accident, injury or desease, is or may be expected to be totally or partially incapacitated for a remunerative occupation and who may be reasonably expected to be able to engage in remunerative employment after completing a training course.

Requests for training may be made directly to the Vocational Rehabilitation Division, of the State Department of Education, Room 215, State House, Indianapolis; referrals are also made by the Industrial Board of Indiana in their report of industrial accidents, the state employment service, state public welfare department, individuals and by all interested public and private agencies.

FORM PRESCRIBED BY STATE DEPARTMENT OF
PUBLIC WELFARE AND STATE BOARD OF ACCOUNTS

DPW FORM 16
3-17-39
3M

THE COUNTY DEPARTMENT OF PUBLIC WELFARE

OF_____COUNTY

_____INDIANA

Application No. ___-___-_____
Type Code Serial

NOTICE TO TOWNSHIP TRUSTEE OF ASSISTANCE GRANTED

Full Name_____

Address_____

_____

To the Trustee of _____Township

_____

The county department of public welfare by authority of the county board of public welfare has awarded _____ assistance to the
(Enter type of assistance)
person named above in the amount of $_____ per month to begin on or about

_____19___
(Enter date payment begins)

Signed_____
County director of public welfare

Date_____, 19___

INSTRUCTIONS
Prepare in duplicate
1st copy to township trustee ☐

2nd copy retain in county department files ☐

P-2777-7-8-38

REPORT TO BOARD OF INDUSTRIAL AID FOR THE BLIND
From
STATE DEPARTMENT OF PUBLIC WELFARE

Date _____

Name _____ Code & Serial _____

Address _____

Date of Birth _____

Married, Single, Widow, Widower or Divorced _____

Occupation before loss of sight _____

_____

Occupation since loss of sight _____

_____

General health of applicant (please check)

Poor _____
Fair _____
Good _____

Has applicant any mental or physical disability other than blindness? _____

If so, explain _____

Remarks: _____

_____

_____

_____

_____

_____

(Use this space for specific referral)

_____
Reviewer

P-652

SECTION 3

REMOVALS

I. INTER-COUNTY REMOVALS

A. GENERAL STATEMENT

Section 70 of The Welfare Act provides that a recipient of blind assistance who moves to another county in this state with the approval of the state department shall be entitled to continue to receive assistance as a blind person in the county to which he has moved, and the county department of the county from which he has moved shall transfer all necessary records relating to the recipient, to the county department of the county to which he has moved. It has seemed advisable, in order to facilitate contact with the recipient, for the case record to be carried in the county in which he is living. The removal procedure gives an opportunity for the state department to determine whether the arrangement which the recipient has made is suitable and permanent before authorization is given for the transfer of the records.

B. REMOVAL BEFORE BECOMING RECIPIENT

If an applicant for blind assistance moves to another county in the state before assistance has been granted, the usual removal procedure is not followed. However, it is possible, in order to facilitate completion of the investigation for the state department to authorize the county department serving the county from which the applicant has moved, to transfer any records which they may have to the county to which he has moved. Therefore if it comes to the attention of a county department that an applicant has moved to another county in the state and will remain there permanently, and if the county department believes that the investigation procedure could be expedited by a transfer of the records to the county to which the applicant has moved, the original county should notify the state department that the applicant has moved. The state department will then write to the county department of the county to which the applicant has moved and if it appears that the arrangement will be permanent, authorization will be given for the transfer of the records. A new application in the second county is unnecessary.

C. REQUEST FOR REMOVAL PERMISSION FOR RECIPIENT OF ASSISTANCE

Request for removal permission may originate with either of the counties involved, or with the recipient, or may come to the attention of the state department in some other way. It is advisable for the county department of the county from which the recipient has moved to notify the state department as soon as the removal comes to their attention so that if it appears that the arrangement is suitable and permanent the records may be transferred as promptly as possible to the county department of the county to which the recipient has moved.

Upon receipt of a request for removal permission from the county department of the county in which the recipient has been living, the division of public assistance corresponds with the county department of the county to which the recipient has moved or is desirous of moving, in order to determine whether the plan is advisable and in the best interests of the recipient and whether it appears to be permanent. If the request originates with the recipient or with the county department of the county to which he has moved, or if it has otherwise been brought to the attention of the state department, the procedure is the same except that the state department corresponds also with the county department of the county from which the recipient has moved in order to determine whether, in their opinion, permission for the removal should be granted.

1. Information from County of Former Residence

When the state department is requested to grant permission for removal it is helpful to have the following information from the county from which the recipient has moved:

a. A description of former living conditions, including the standards of living and personnel of the household.

b. Reasons for removal

c. Persons other than recipient who are involved in the removal. If the recipient is moving with a family group, information should be obtained concerning these persons, their reasons for moving, and their attitude toward having the recipient accompany them. If a dependent spouse or dependent minor children will accompany the recipient, information concerning the way in which their needs have been met in the former county should be given, as well as plans for meeting their needs in the new county of residence.

d. The address to which the recipient is moving. If this is on a rural route, directions for reaching the home and the name of the family with whom the recipient will live, or the name of the landlord from whom he will rent, should be given. If the recipient is moving into the home of relatives or friends, their relationship to him and their attitude toward him should be explained, if such information is available.

e. Statement regarding advisability of removal.

2. Information from County to Which Recipient Is Moving

The following information is necessary from the county to which the recipient has moved or is moving:

a. Address of the recipient in the new county and a description of the living arrangements there, including information relating to the physical surroundings and their suitability for the recipient, other persons in the household, their relationship to the recipient and their attitude toward having him in their home. If the recipient will live alone in rented property information concerning the rental arrangement should be included.

b. Information indicating whether or not the plan appears to be permanent.

c. Attitude of the recipient toward the arrangement.

d. If a dependent spouse or dependent minor children have been involved in the removal, information concerning the way in which their needs will be met in the new county is important.

e. An expression of opinion from the county to which the recipient has moved indicating whether they believe the arrangement is desirable and in the best interests of the recipient.

3. Determination by State Department

In considering whether permission for a removal should be granted, the state department is concerned primarily with whether or not the arrangement is a desirable one for the recipient and whether it will in all probability be permanent.

a. Procedure When Removal Permission Is Granted

Upon receipt of information from both county departments involved indicating that the plan is a desirable one for the recipient and will prove permanent, the state department notifies both counties concerned that removal permission has been granted. At the same time the county from which the recipient has moved is authorized to transfer all records pertaining to the recipient to the county to which he has moved. When the county to which he has moved has received the records from the former county, a new code and serial number should be assigned and this should be forwarded to the state department. From that time the case is known by the code and serial number assigned to it by the county to which the recipient has moved. A new application is unnecessary.

b. Removal to Private Institutions

When a recipient of blind assistance moves from the county in which he has been living to another county to enter a private institution, the county from which the recipient has moved should inform the state department so that if the recipient plans to remain permanently in the new county, the state department may authorize the transfer of the case records to that county.

II. ABSENCE FROM THE STATE

A. GENERAL STATEMENT

Section 96 of The Welfare Act provides that if a recipient of assistance moves out of the state he shall be ineligible to receive assistance in this state except that temporary absence from the state or county for such periods of time and for such reasons as the state board of public welfare shall approve, shall not be deemed to interrupt the residence of the recipient. Doubtless, such situations will arise in which it is desirable to permit recipients of blind assistance to visit for temporary periods in homes of relatives or friends in other states without being penalized by the withdrawal of assistance. Relatives or friends may be able to offer a home for a short period to the blind person, and it has seemed advisable to make it possible for recipients to avail themselves of these temporary resources. Illness sometimes makes it necessary for a recipient of assistance to go to another state in order to receive personal care during the period of his illness.

Regulation 2-801 defines temporary absence from the state as absence from the state because of a health condition or where the recipient is on a visit with the intent of returning to the state and where the absence at any one time is not in excess of nine continuous months, such period to commence on the date the recipient last left the state. This regulation was passed to permit the recipient to have the advantage of situations as those suggested in the preceding paragraph.

Regulation 2-803 provides that in cases where absence from the state has resulted in a withdrawal of assistance to a blind person, continued absence of the person from the state for a period not in excess of three months from the effective date of the withdrawal of assistance shall be considered temporary absence and shall not be deemed to interrupt continuing residence in the state for the purpose of determining eligibility for assistance under The Welfare Act.

In some instances recipients who have left the state write directly to the state department; in other cases they may notify the county department. In any event, the county department should at all times know the whereabouts of recipients and should notify the division of public assistance of the state department whenever a recipient leaves the state; likewise the state department on notification by a recipient that he has left the state will report the new address of the recipient to the county department so that the procedure as outlined in regulation 2-804 may be instituted.

B. INVESTIGATION OF CIRCUMSTANCES SURROUNDING TEMPORARY ABSENCE FROM THE STATE

The responsibility for determining whether the absence of a blind recipient from the state is for a temporary period in accordance

with regulation 2-801, rests with the county departments. It will be necessary to ascertain whether the recipient is absent for a health reason or for a visit with the intent to return to the state in order to determine his continued eligibility for assistance. It will be necessary to have an investigation made of the circumstances under which the recipient will be or is living in the state to which he is going or has gone in order to secure information which will enable the county department to determine whether he remains eligible to receive assistance, and if so, what the extent of his need may be under his changed living arrangements. In considering whether or not it is the intent of the recipient to return to the state, former living conditions should be taken into account as well as the proposed arrangement in the community to which he is going. The fact that the recipient is maintaining a home in the county in which he has been living or the fact that he has left furniture or other possessions stored there, or has definite ties in the county to which he might wish to return, would in most cases tend to establish that it was his intent to return.

C. PROCEDURE TO BE FOLLOWED WHEN RECIPIENT LEAVES THE STATE

In accordance with regulation 2-804, the county department, as soon as it is known that a recipient of blind assistance is about to leave or has left the state, shall for the purpose of redetermining the needs of the recipient, direct an inquiry to the interstate correspondence section of the state department requesting an investigation of the circumstances under which the recipient will be or is living in the state to which he is going or has gone. It should not be assumed that a recipient of blind assistance will receive the same amount of assistance while he stays outside the state as he was receiving before he left Indiana as the changed living arrangements might be expected to have some effect on the degree of his need.

If the county department determines that the absence will be temporary and for a visit or a health reason, in accordance with regulation 2-801, assistance may be continued until the recipient has been outside the state for a period of nine continuous months provided he remains otherwise eligible.

1. Use of DPW Form 98, Notice Concerning Absence From The State.

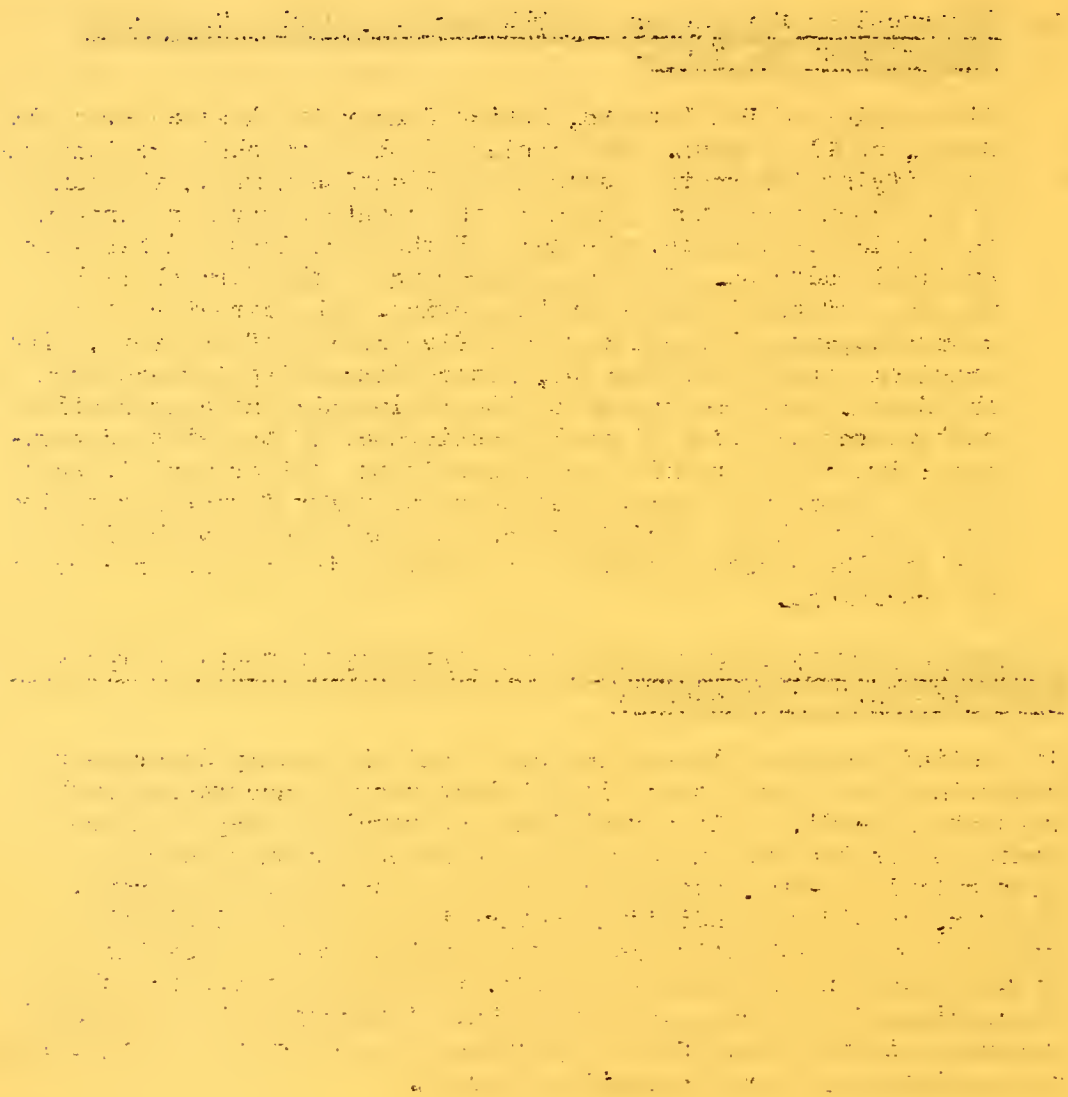
In accordance with regulation 2-804, as soon as it has been ascertained that a recipient has left the state, he shall be notified in writing by the county department through the use of DPW Form 98, Notice Concerning Absence From The State, of his rights regarding temporary absence from the state, in order that he may be fully informed as to the factors affecting his continued eligibility.

2. Instructions for the Use of DPW Form 98, Notice Concerning Absence From The State.

Five copies of DPW Form 98, Notice Concerning Absence From the State, shall be made. All copies of the form shall contain the identifying information such as application number, the name of the county and town in which the county department issuing the notice is located, the name of the recipient and his last available address. The date appearing on the form shall be the date of the issuance of the notice. The director of the county department shall sign all five copies of the form. The original copy of DPW Form 98, Notice Concerning Absence From the State, shall be mailed to the recipient; one copy shall be sent to the division of public assistance of the state department; two copies shall be enclosed in the letter that is sent to the interstate correspondence section for forwarding to the state to which the recipient has gone and one copy shall be kept by the county department for filing in the case record of the recipient.

D. PROCEDURE WHEN RECIPIENT RETURNS TO STATE WITHIN THREE MONTHS FROM EFFECTIVE DATE OF WITHDRAWAL.

If a blind recipient leaves the state and the county department determines that his absence is not temporary in accordance with regulation 2-801, or if a recipient has remained away from the state longer than the nine months continuous absence permitted by regulation 2-801, assistance must necessarily be withdrawn. However, should the individual return to the state within three months from the effective date of the withdrawal of assistance, in accordance with regulation 2-803, the period of absence shall be considered temporary and not to have interrupted his continued residence in the state for the purpose of redetermining eligibility for assistance, if reapplication is made.



Prescribed by the State
Department of Public Welfare
and Approved by the State
Board of Accounts

DPW Form No. 98

Application No.____ ____ _____
Type Code Serial

THE COUNTY DEPARTMENT OF PUBLIC WELFARE

OF_____COUNTY

_____INDIANA

NOTICE CONCERNING ABSENCE FROM THE STATE

Date_____19___

Name_____
First Middle Last

Address_____

It has recently been brought to our attention that you are at present residing in a state other than Indiana. Since continued residence away from Indiana will have a definite bearing on your continued eligibility for assistance, we are taking this means of notifying you of the provisions of the law and the rules and regulations of the state department of public welfare, concerning absence from the state for all recipients of public assistance.

In accordance with the provisions of Section 96, of The Welfare Act of 1936, as amended, a recipient of public assistance who moves out of the state becomes ineligible to continue to receive assistance from this state, except that temporary absence for such reasons and such periods of time as the state board of public welfare shall approve shall not be deemed to interrupt the residence of the recipient. By rule and regulation of the state board of public welfare, temporary absence has been defined as absence due to a health reason or a visit, with the intent of returning to Indiana for residence. The absence may not be in excess of a continuous period of nine (9) months at any one period of time.

In order that there may be no misunderstanding relative to your particular situation, we are taking this means of notifying you of the things that may affect your eligibility if you continue to remain away from Indiana. They are listed below:

1. If a recipient of assistance leaves Indiana for any reason other than for health, or a visit, with the intention of returning here, he becomes immediately ineligible for continued assistance.

2. If a recipient of assistance leaves Indiana for a health reason or for a visit with the intent of returning here, his assistance will be withdrawn at the end of nine (9) months continuous absence from the state.

3. If, in any instance, it becomes necessary to withdraw assistance because of the recipient's absence from the state, the continued absence of the person for a period of three (3) months from the effective date of the withdrawal of his assistance will not interrupt his residence in Indiana for

the purpose of determining his eligibility should he return to Indiana and reapply for assistance within the three (3) month period.

4. Usually if a person is absent from Indiana for more than twelve (12) continuous months, he has lost legal settlement in Indiana for the purpose of obtaining relief through the township trustee, and the state department of public welfare is unable to authorize his being returned to Indiana.

5. County departments of public welfare are responsible for determining whether or not a recipient of assistance continues to be eligible on a needs basis after he has left the state, and it should not be assumed by a recipient that he will continue to receive the same amount of assistance while he stays in the other state that he was receiving before he left Indiana.

If you have further questions relative to your situation, we would be glad to have you communicate further with us.

Signed_____
County Director of Public Welfare

1 Copy to the Recipient	☐
1 Copy to the Division of Public Assistance	☐
2 Copies to the Interstate Correspondence Section of the State Department of Public Welfare.	☐
1 Copy to the County Department	☐

P-3399-3-27-39

SECTION 4

CASE CORRESPONDENCE

I. GENERAL STATEMENT

The major portion of the correspondence of the county departments of public welfare will be composed of letters to and from other county and state departments in regard to case investigations. Such letters should be considered as substitutes for a personal visit or interview which distance makes impractical. The visitor writing the letter should endeavor to phrase his correspondence in such a way that the worker in the public welfare department to which he is writing will be able to understand clearly the problems presented by the situation and will be able to use the information given to best advantage.

Public welfare departments can furnish valuable service to one another through this type of correspondence. Over a period of time each county department will probably request about the same number of investigations from other departments as it is requested to make, so that no unusual amount of work in this respect will be placed on any one county.

County departments may wish to keep a register of incoming and outgoing mail for the purpose of determining the volume of the correspondence and the promptness of replies. District representatives of the state department may be consulted in regard to various methods for setting up such a register.

Some suggestions are made below in regard to the content of letters of inquiry and letters of reply.

A. LETTERS OF INQUIRY

The letter of inquiry should state explicitly the case number, the surname and first names of the individuals under care, together with their ages and color. If the request involves contact with an employer, hospital or court, it may be possible to include the means of identification used for administrative purposes and thus facilitate the investigation.

The purpose for which the letter is written and the nature of the inquiry requested should be indicated in the beginning of the letter. When it is considered necessary for clarity to include past history of the applicant or recipient, those facts should be selected which bear on the immediate problem, but which may be subordinate to it. The immediate situation should be stated clearly together with the reason for the application and the length of time the inquiring agency has known the family or individual. There should be a definite attempt to correlate the problems presented with the request for information and plans on the part of the inquiring agency.

The exact address of the relatives or persons to be interviewed should be stated. If the address is rural, directons for reaching it should be included whenever possible. If exact information regarding the address is not obtainable, clues such as names of persons with whom the individual has lived or for whom he has worked are frequently of assistance to the receiving agency.

The letter should attempt to reflect the interest of the writer in securing the information since the receiving agency has not in most instances seen the client and must depend upon the written communication for its "feel of the case". Therefore, the letter of inquiry should be vivid enough to arouse interest and full cooperation on the part of the receiving agency. The letter should conclude by asking specific questions as to the kind of information or assistance desired. An inquiry which is too general in its scope, such as a request for a social history, often results in unnecessary and repetitious effort on the part of the receiving agency.

B. LETTERS OF REPLY

Answers to letters of inquiry should be dispatched promptly. If there is some unavoidable delay, such as inability to contact a person to be interviewed, a brief explanation should be sent to the inquiring agency with an indication of when a more definite report may be expected.

The letter of reply should use the spelling given in the original inquiry to facilitate identification, but should note any corrections that should be made. It should include the names of persons interviewed or the sources of information used and should give the facts obtained from each. It is equally important that the reply indicate the persons or sources of information that could not be located.

Insofar as possible, an attempt should be made to answer specifically each of the questions raised in the letter or inquiry, and when it is impossible to do so, the reasons should be given for failure to cover all of the points. The reply should include a statement of any plans as developed by the worker in conference with those interviewed, as well as any additional information secured from sources not specifically noted in the inquiry.

An effort should be made to keep the reply as objective as possible. Opinions and impressions of the interview held should be labeled as such and not confused with facts.

II. INTER-COUNTY LETTERS

When a county department finds that it is in need of information from another county within the state for the completion of an investigation, a letter, stating the request should be written to the county department of the county in which the inquiry is to be made. Such inquiries may include requests for

interviews with relatives, the securing of information about property, the verification of some phase of eligibility through documentary evidence, etc. In connection with interviews with responsible relatives, it is not sufficient to forward a copy of DPW Form 11 to the county in which the relative lives. When this form is used it should always be accompanied by a letter which explains the situation in more detail. All county departments should give prompt attention to requests for such investigation, and return the information to the county department making the inquiry. If a county department is unable to locate the person or source of information to be contacted it should immediately notify the county department from which the request came.

III. INTER-STATE LETTERS

The state department of public welfare has established a state forwarding center for handling interstate correspondence for the following purposes: to render more effective service to counties; to assist in difficult situations involving interstate relationships; to make possible an analysis of inquiries on a state-wide basis with a view to improving procedures and to assist in developing more effective interstate relationships.

The out-of-state inquiries to be handled by county departments are not confined to inquiries on public assistance cases only but may include requests for investigations in any area of service.

There are five procedures to be followed based on the following divisions of types of inquiries: (1) inquiries received from other states by the state department, (2) inquiries received from Indiana county departments for forwarding to other states, (3) inquiries sent direct to county departments by other states, (4) requests of Indiana county departments for verifications from public records in other states, (5) requests of Indiana county departments for contacting legally responsible relatives residing in other states.

A. INQUIRIES RECEIVED FROM OTHER STATES BY THE STATE DEPARTMENT

In many instances letters originating in states other than Indiana, requesting investigations in Indiana, will be sent directly to the state department. These letters will be acknowledged by the state forwarding center and will then be sent with a letter of referral to the particular county department involved. As prompt service to other states is desirable the county department receiving an inquiry should make every effort to complete its investigation and reply within a period of two weeks. Replies from the county departments to such inquiries should be made in quadruplicate, one copy being retained by the county department, and three copies being sent to the state department in care of the supervisor of interstate correspondence, in order that two copies may be mailed to the out-of-state inquiring agency and one copy may be kept by the state department.

B. INQUIRIES RECEIVED FROM INDIANA COUNTY DEPARTMENTS FOR FORWARDING TO OTHER STATES

Letters in which county departments ask for investigation by social agencies in other states should be made in quadruplicate, one copy to be filed in the county department's case record, and three copies to be sent to the state department in care of the supervisor of interstate correspondence. The forwarding center will retain one copy for use in the state department and will forward two copies to the out-of-state agency. The reply from the out-of-state agency will be routed through the forwarding center and sent with a letter of transmittal to the county department.

C. INQUIRIES SENT DIRECT TO COUNTY DEPARTMENTS BY OTHER STATES

In some instances other states may send letters requesting investigations in Indiana directly to a county department rather than to the state department. In cases of this sort, the county department should make every effort to complete its investigation and reply within a period of two weeks. Instead of replying directly to the inquiring agency, as has been done in the past, the county department should send its reply to the state department so that it may be sent by the forwarding center to the inquiring out-of-state agency. The letter of reply should be made by the county department in quadruplicate, one copy to be retained by the county department, and three copies to be sent to the state department in care of the supervisor of interstate correspondence, together with a copy of the original letter of inquiry from the out-of-state agency. Two copies of the county department's reply will be sent by the forwarding center to the inquiring out-of-state agency, and a copy of the original letter from the inquiring state, together with a copy of the reply of the county department, will be filed with the state department.

D. REQUESTS FOR VERIFICATIONS FROM PUBLIC RECORDS IN OTHER STATES

If the only information desired from another state is a verification from a public record, such as birth, death, marriage, divorce, etc., the county department should write directly to the office of the public official in the other state in whose possession the public records will be found, rather than asking a social agency in the other state to make this verification. If a reply is not received within a reasonable time, or if further interpretation is desired, a letter to a social agency in the other state may be necessary, in which case the procedures outlined in item III-B of this section of the manual should be followed. This method of handling requests for verifications from public records in other states will save time in many instances and will place the burden of investigations on out-of-state agencies only in those instances where social information and planning are desired.

In certain states there is a policy or a law to the effect that a fee must be charged by the Department of Health or Bureau of Vital Statistics before releasing information from their records. When it is necessary for a county department to make such an inquiry from another state, the fee, if reasonable may be paid on regular county claim blanks and charged to Appropriation 213, Other Operating Expense. When it has been determined after the initial inquiry that a fee is charged, and that this fee is reasonable, the county department should forward the claim together with the request for the information so that the claim may be filed by the payee. The claim must be sworn to, filed, and handled in the same manner as other county welfare claims.

E. USE OF DPW FORM 11 (REVISED) WHEN CONTACTING LEGALLY RESPONSIBLE RELATIVES RESIDING IN OTHER STATES

This procedure for handling interstate correspondence in no way affects present procedures for contacting directly legally responsible relatives residing in other states. In any instance, however, where the service of an out-of-state agency is desired in contacting such relatives, the procedure outlined in item III-B of this section should be followed.

SECTION 5

COMPLAINTS AND APPEALS

I. GENERAL STATEMENT

Some dissatisfactions may be expected to arise in situations where any person or department has the authority to refuse or reject a request. Because of this, and because of the fact that the Federal Social Security Act requires that a state plan for blind assistance must provide for granting an opportunity for a fair hearing before the state agency, to any individual whose claim for blind assistance is denied, certain provisions relative to appeals were made in The Welfare Act. Since the blind assistance program is state administered the procedures in handling appeals are necessarily different from those used in connection with appeals in the aged or dependent children assistance programs. The Welfare Act of 1936 provides that in case of an appeal from an applicant or recipient of blind assistance, the state board shall designate an investigator to make such additional investigations as may be necessary, to review such case and to grant the appellant a fair hearing in the county in which the appellant resides, and to report such findings to the appellant and to the state board. The special investigator's findings shall be final unless the appellant shall request a formal hearing before the state board within ten days after receiving the report from the special investigator.

The appeal procedure may not only safeguard the interests of applicants and recipients, but may be of assistance to the county and state departments in changing faulty procedures which they may have developed and in helping the county departments, as agents of the state department, to resist pressures that are unwarranted.

II. COMPLAINTS

A. DEFINITION OF A COMPLAINT

The state department considers any letter, coming to its attention, from an applicant, recipient, or from a person interested in the applicant or recipient, definitely stating a problem relationship between the county department or the state department and the applicant or recipient, a complaint.

B. COMPLAINT PROCEDURES

Although the blind assistance program is state administered, blind persons will look to the county department rather than to the state department for help with many of their problems. As the agent of the state department, a county department has as much responsibility for the extension of service, interpretation of the program, and adjust-

ment of difficulties in blind assistance cases as they have for other phases of their work. In connection with complaints, therefore, the county department has an important function to perform.

On receipt of a complaint, an acknowledgment will be sent to the complainant by the state department.

The state department will bring the complaint to the attention of the county department in order that the county department can reinvestigate the situation. This reinvestigation, or re-evaluation of the complaint situation, may accomplish several things: first, it may demonstrate to the applicant or recipient that the county department and the state department are willing to reconsider a former decision in order to correct any possible errors; second, the county department has, at the time of this reinvestigation, a valuable opportunity to interpret the welfare program in general to the recipient or applicant and to interpret specifically the item which caused the original complaint. County departments are asked to review each complaint very critically because of its public relations value and the opportunity it creates for better service to the individual applicant or recipient.

III. APPEALS

A. DEFINITION OF AN APPEAL

The state department has defined an appeal as a second complaint letter written by an applicant or recipient regarding a situation about which he had previously complained; or a letter from an applicant or recipient in which an appeal from a decision of the state department is expressly requested. The appeal letter should be signed by the appellant unless he is physically unable to write or is unable to sign his name. In such instances his mark should be witnessed.

B. APPEAL PROCEDURES

1. Reinvestigation

On receipt of an appeal by the state department an acknowledgment will be sent to the appellant by the state department; the appeal will be referred to the district representative for discussion with the county department, preliminary to his making an additional investigation of the appeal situation as a basis for a recommendation to present to the state department.

If the previous state board action has been a rejection the district representative will have two copies of DPW Form 40 (Revised), Application for Assistance to the Blind, filled out.

These will be given to the county department for handling in the usual manner.

If, after the investigation of the appeal by the district representative, he recommends a change in the previous decision of the state department in favor of the appellant, the proper presentations are made to the state board, and the appellant is notified by a letter from the state department of the closing of his appeal. If, after investigation by the district representative, the decision is not in favor of the appellant, the state board, on receipt of the report from the division of public assistance, will appoint a special investigator to make a further investigation of the case.

2. Special Investigation of an Appeal

The Welfare Act provides for the appointment by the state board of a special investigator to make such additional investigations as may be necessary. When, on investigation of an appeal, the district representative recommends upholding the previous decision and it is not in favor of the appellant, the appeal is referred by the state board to the special investigator for further investigation. If, after investigation, his decision is in favor of the appellant and an award is made in accordance with the special investigator's recommendation, the appellant is notified by the state department of the closing of the appeal.

If, after investigation, the special investigator upholds the previous decision of the state department, a letter shall be written to the appellant by the special investigator informing him of this decision and also that he has a right to a fair hearing before the state board if his request is received within ten days.

3. Formal Hearing

The appellant's request for a formal hearing must be made within ten days after the receipt of the letter informing him of his right to request such a hearing. If the appellant requests a hearing he shall be notified by the state department of the time and the place of the hearing. After the formal hearing the appellant will be notified by letter of the decision of the state board and the appeal will be closed.

4. The Withdrawal of an Appeal

If the appellant wishes to withdraw his appeal at any point in the appeal procedure, he may do so by signing such a request. This may happen in those instances where eligibility requirements have not been clearly indicated and where the appellant with a more adequate interpretation of the requirements decides that he is ineligible and that an appeal is unnecessary.

SECTION 6

EYE TREATMENT

I. GENERAL STATEMENT

Individuals may make application for temporary eye treatment only or may apply for monthly assistance and temporary eye treatment. An individual applying for temporary eye treatment must meet all the degrees of eligibility as set forth in The Welfare Act of 1936, with the exception of the degree of blindness. If an individual has vision better than 20/200 and by receiving restorative or preventive medication, his sight can be restored or his vision kept from becoming progressively worse, he shall be considered eligible for treatment, if all other phases of eligibility are met.

II. APPLICATION FOR EYE TREATMENT

If the individual is applying for eye treatment only, it is necessary for the county department to submit DPW Form 40 (Revised), Application for Assistance to the Blind; DPW Form 44, Notice to Report to Eye Physician; DPW Form 45, Physician's Report on Eye Examination; DPW Form 56, Request for Eye Treatment; and DPW Form 57, Essential Eye Treatment Data. It must be indicated on these forms that the material is submitted for eye treatment only. The application filed for temporary eye treatment only can never be accepted as an application for monthly assistance, and if, at a later date, the recipient of eye treatment decides that he is in need of monthly assistance, it will be necessary to submit a new application in order to establish eligibility for monthly assistance.

If the DPW Form 40 (Revised), Application for Assistance to the Blind, was filed for monthly assistance, and eye treatment is to become a secondary part of the original application, then only one application is needed.

III. ELIGIBILITY

An individual applying for eye treatment must meet the same requirements as those applying for monthly assistance, with the exception of the degree of blindness. In addition, before an individual can be considered for eye treatment, there must be a definite medical recommendation recorded on the DPW Form 45, Physician's Report on Eye Examination. In most instances, it is preferable to consider only cases where the doctor states that the prognosis is fair or good. It is usually understood that the doctor has taken into consideration evident and apparent physical disabilities of the patient before he states the prognosis of the recommendation in regard to treatment or surgery. The eye physician, in a general eye examination, can frequently diagnose the outstanding pathological defects, such as senility, hypertension, mental illnesses, etc., but he may be dependent upon

outside sources for histories of constitutional diseases such as syphilis, diabetes, cardiac deficiencies, congenital defects, etc. The doctor may request the services of another doctor, such as a general practitioner, for consultation or he may suggest that the visitor from the county department assist in obtaining significant social history which would determine the advisability of operation.

IV. PROCEDURE

Upon receipt of the DPW Form 45, Physician's Report on Eye Examination, recommending a treatment plan, the case is discussed with the state supervising ophthalmologist for approval of the treatment plan. If, in the opinion of the state supervising ophthalmologist, it seems advisable for the state department to enter into a treatment plan, the county department is authorized by the state department either by letter or by SDPW Form 1256, Decision of State Supervising Ophthalmologist on Blind Assistance Case, to complete the investigation. This investigation should not be started if the individual is applying for eye treatment only until after the case has been approved for a plan of treatment.

If the state supervising ophthalmologist does not recommend that treatment be given, a letter or SDPW Form 1256, Decision of State Supervising Ophthalmologist on Blind Assistance Case, is sent to the county department notifying them of the doctor's decision and suggesting the disposition to be made. The rejection should be recorded in the narrative record indicating the reason the case cannot be accepted for eye treatment. A DPW Form 46, Report on Applicant for Blind Assistance after Eye Examination, is never applicable in cases of eye treatment, as this form applies only to cases where an individual who is applying for monthly assistance is not blind within the meaning of the definition.

After the eye treatment plan has been approved, and after the completion of the investigation by the county department and subsequent review by the district representative, the eye treatment case is presented to the state board for final action. At the time of the approval by the state board, the necessary funds are allotted for a temporary eye treatment grant. The doctor, hospital, applicant and county department are notified of the approval of the plan and are authorized to proceed with surgery or treatment.

Contrary to the procedures established for operative cases, treatment is most frequently planned for in the monthly assistance grant if the individual is a recipient of monthly assistance. In no instance, however, shall the county department recommend an allowance for eye treatment, surgical or otherwise, to be paid for out of the monthly assistance grant, until they are notified by the state department that the treatment plan has been approved by the state supervising ophthalmologist. If, however, the applicant is not blind within the meaning of the definition and therefore not a recipient of monthly assistance, or if he is a recipient and is already receiving the maximum award, grants for treatment can be arranged.

If an individual is a recipient of monthly assistance and because of surgical procedures has his vision improved so that he is no longer blind within the meaning of the definition, it will be necessary to withdraw his monthly blind assistance as soon as his sight is stabilized. Blind assistance is not withdrawn until after the individual has been fitted with glasses and has had an opportunity to adjust to the use of these lenses, if glasses were needed and recommended. This is particularly true in cases where the patient has had a cataract removal, or a specific operation for glaucoma. In some operations it is not necessary for the patient to be fitted with glasses, and blind assistance will then be withdrawn on a statement from the doctor that the patient has recovered. This recommendation of withdrawal of blind assistance will be made by the division of public assistance as in most instances, the surgeon reports directly to this department the visual acuity obtained with glasses.

V. SPECIAL FORMS DPW FORMS 56 and 57

A. GENERAL STATEMENT

DPW Form 56, Request for Eye Treatment, and DPW Form 57, Essential Eye Treatment Data, are used in all cases applying for temporary eye treatment.

B. INSTRUCTIONS FOR FILLING OUT DPW FORM 56, REQUEST FOR EYE TREATMENT

(See sample form at end of this Section).

The county department will not fill in the material in the space provided "For Use of State Department Only." These recordings will be entered after the DPW Form 56, Request for Eye Treatment, is received by the state department. In the first blank space, fill in the name of the doctor who is to perform surgery, and his address, including street address and city. Fill in under date of examination, the date on which the DPW Form 45, Physician's Report on Eye Examination, was executed. The form is to be signed by the applicant and his complete address should be given. The name and address of two witnesses must also be recorded as a matter of protection to the state and county departments. Fill in the date the form is executed.

C. INSTRUCTIONS FOR FILLING OUT DPW FORM 57, ESSENTIAL EYE TREATMENT DATA

(See sample form at end of this Section)

DPW Form 57, Essential Eye Treatment Data, will be made out by the county department if the operation is to be performed in a local hospital or one in an adjoining community, and by the supervisor of eye treatment if the surgery is to be performed in Indianapolis. Both forms will be made out in duplicate--the originals for use of the state department, and the duplicate copies for use in the county office.

DPW FORM 57, ESSENTIAL EYE TREATMENT DATA

County Department of Public Welfare of _____ County.
Enter name of county in which application was made.

Application Number

Enter the same number as that assigned to the application.

Applicant's Name

Enter surname under which the case is carried in the files of the county department and give full first and middle names.

Address

Self-explanatory.

Item 1. Enter here the name of the doctor who is to perform the surgery or to give the treatment for which the individual is applying. It is necessary that the complete address of the doctor be given.

a. Enter here the name of the medical examiner who recommended the original treatment or surgery on the DPW Form 45, Physician's Report on Eye Examination.

Item 2. Information from eye surgeon

(1) Enter here the doctor's estimate of the cost of his charges for such treatment or operation.

(2) Enter here the cost of correcting glasses as estimated by the physician.

(3) Enter here the number of days required for hospitalization as suggested by the attending physician

Item 3. Information from Hospital

(1) Enter here the cost of ward accommodations per week and per day as obtained through hospital authorities.

(2) If wards are not available, quote the most reasonable room plan per day and per week. This is also obtained through hospital authorities.

(3) Enter here the cost of operating room as obtained through hospital authorities.

(4) Enter here the cost of special laboratory fees as estimated by the doctor and established by the hospital.

(5) Enter here the estimated cost of drugs as suggested by the doctor and approved by the hospital.

Item 4. Other Costs

Enter in this section any expenditures for specific examinations which might be necessary as a safeguard in the recovery of the patient. This service must be specified as to type, cost and need. It may include a general physical examination, special tests, special laboratory fees which are not given as part of the routine examination or hospital examinations or special nursing services that are requested by the doctor. The item for transportation can also be allowed here, over railroad or bus, but before payment may be made, receipts from the ticket agent must be submitted on the company's official receipt form. If the individual is being brought to Indianapolis, five cents mileage is not allowable, but the person bringing the patient for treatment can present an itemized statement of his actual expenditures, including gasoline and oil.

Total Estimated Costs

Enter here the sum total of all expenditures designated on the DFW Form 57, Essential Eye Treatment Data.

Item 5. Enter here by checking the word "yes" or "no" whether the patient has ever had an admission to the Robert Long or Riley Hospitals. Also enter whether the individual was admitted to Robert Long or Riley and the approximate time, the name of the county from which referral took place, and the type of treatment for which he was admitted.

Signature of County Director

The county director signs the form in the designated space.

Date

Enter the date on which the director signs the form.

VI. SELECTION OF SURGEON

By resolution of the state board, no physician will be authorized to conduct an approved eye treatment plan who has not been approved by the state supervising ophthalmologist. The physician who is to carry on the treatment

plan may be selected in one of the following ways: first, by the choice of the individual applicant or recipient with the approval of the state supervising ophthalmologist; second, by the choice of the examining physician with the approval of the state supervising ophthalmologist; third, by the choice of the state supervising ophthalmologist himself. Every consideration is given to the choice of the applicant or recipient since his faith in the operating surgeon may be a definite asset in effecting his recovery. The state supervising ophthalmologist very rarely is asked to make the decision regarding the surgeon to perform the operation. This occurs only where very rare and delicate operations are to be performed and where one doctor has developed an unusual skill in doing a particular type of operation. This would apply to such cases as a re-attachment of a retina, etc.

VII. HOSPITALIZATION

Many physicians who are participating in the surgical program are now permitted to name the hospital where they prefer to operate. If the doctor holds staff membership in one or more hospitals, the hospital arrangement should be made to the convenience and preference of the doctor rather than to the patient. The equipment of the hospital should be taken into consideration, as frequently in smaller communities hospitals are not equipped to take care of cataract operations, and inadequate nursing staffs make ward nursing care for the recovery of the patient difficult. It is preferable that individuals receiving eye treatment through the state department be hospitalized in ward accommodations. If ward accommodations are not available, it is then suggested that the cheapest room plan be allowed. The cost of surgery, laboratory fees, special medication etc., will be furnished on the proper request from the hospital authorities. Private nursing service will be provided only at the request of the doctor, but approval for such must first be obtained through the state department.

VIII. GLASSES

The facilities of the eye treatment program are not available to provide glasses for all persons who need them or who would be more comfortable with them. There are, however, certain instances where, with the approval of the state board, funds for the procurement of glasses may be made available. In all cases involving the question of glasses, the matter is discussed with the state supervising ophthalmologist for his opinion, before the recommendation is made to the state board relative to the advisability of their procurement.

Glasses may always be provided through the eye treatment program when they are required after a correcting operation or are a secondary part of the treatment plan. The only other instance in which they may be provided is where it is definitely established through investigation that the individual is eligible for monthly assistance, and the procurement of proper lenses

will mean the difference between his being blind or not being blind within the meaning of the definition of blindness in The Welfare Act, and where it has been ascertained definitely by the county department that the individual has no personal resources, and community resources, such as the township trustee, or private community resources are not available to meet his need. In this latter group, therefore, would be included those individuals with a borderline degree of vision, who with glasses, could either be removed from monthly assistance rolls or be found to be ineligible for even an initial award. Included in this group also might be those rare cases of high degree of myopia where, without the fitting of proper lenses, the individual would become progressively worse and eventually become blind within the meaning of the definition of blindness in The Welfare Act.

IX. TRANSPORTATION

Transportation for recipients of eye treatment from their homes to the centers in which treatment will be given may be paid by the State Department of Public Welfare from temporary eye treatment funds, provided the recipient himself cannot make arrangements for transportation and provided there are no local resources available for this purpose.

Transportation may be either by bus, train, interurban, or automobile. The State Department of Public Welfare has an arrangement with the Traveler's Aid Society in Indianapolis for the purchase of tickets for recipients of eye treatment at indigent rates. However, the Traveler's Aid Society in Indianapolis can purchase tickets only when Indianapolis is either the initial or terminal point of the trip. If this method of purchasing tickets is to be used, the State Department of Public Welfare must be notified in sufficient time so that the ticket may be secured and forwarded to the recipient. Indigent rates are available on all railroad lines, on certain traction lines, and on Greyhound bus lines.

On certain bus lines other than Greyhound, it has been possible in some instances to arrange for tickets to be furnished to patients as needed and for the State Department of Public Welfare to be billed for the cost of the tickets. Such arrangements may be made locally by the county departments or can be made by the state department if the bus line maintains an office in Indianapolis. If a number of trips are to be made, as is true in the case of those persons who are receiving sulfanilamide treatment for trachoma, an effort should be made to arrange for the purchase of the tickets in this manner if the situation is such that they cannot be secured at indigent rates through Traveler's Aid Society, and the State Department of Public Welfare should be notified so that proper authorization may be given.

If a credit arrangement for the purchase of tickets is not possible, the recipient may purchase the ticket, securing a signed receipt from the ticket agent. This receipt should be forwarded to the State Department of Public Welfare and reimbursement will then be made to the individual for the expenditure.

If transportation will be by automobile, only the cost of the gasoline and oil used for the transportation of the patient can be paid. The driver of the car should secure signed receipts, in duplicate, from the station attendant from whom gasoline and oil are purchased. These receipts should be forwarded to the State Department of Public Welfare and an invoice-voucher, on which claim for reimbursement may be made, will be sent. The State Department of Public Welfare cannot reimburse an employee of the county department for gasoline and oil used for the transportation of recipients of eye treatment.

X. GENERAL TYPES OF TREATMENT OFFERED IN TEMPORARY EYE TREATMENT

A. The eye treatment program incorporates two general types of medical assistance. The first and larger division is that of restorative medical or surgical procedures whereby an individual regains some of the lost sight. The most familiar condition or diagnosis, which, when surgically treated, falls into the restorative group, is an opacity of the lens, commonly called cataract. The cause of most cataracts is unknown to science, but there are conditions, such as trauma, diabetes, ocular disease, and hereditary factors which are responsible for special cataract formations. Senile cataract occurs in aged people, but is not caused by senility, since age alone is not responsible for the formation of cataracts.

B. The second classification is preventive medication or operative procedures whereby continuous or progressive loss of sight may be prevented and vision stabilized at the acuity established at the time of the medical examination, if not actually improved. The preventive program delves more into a field of general medicine than the restorative program, and therefore the types of preventive treatment are varied, more intense, and frequently of a more protracted duration. Surgery is frequently only a secondary part of the preventive program. Preventive medicine for the eye is dependent upon the physician for early and correct diagnosis with immediate recognition and visualization of the effective treatment plan. If, for instance, tuberculosis is the cause of the declining sight, injections of tuberculin are usually a part of the treatment for prevention of further blindness as well as for the tuberculous condition. If syphilis is the cause, general antiluetic treatment is advised, as well as appropriate treatment for the eye itself. If blindness is caused by a focal infection, the removal of foci, such as tonsils, adenoids, teeth, etc., is in order. Routine insulin for diabetes and medicine for the reduction of high blood pressure should be classed as treatments to prevent blindness. Into a preventive category of surgery would be classified such procedures as removal of growths, pterygia, tumors, etc., enucleation (removal) of a sick or sightless and painful eye which is affecting the health of the good eye.

XI. WORKING RELATIONSHIP WITH ROBERT LONG HOSPITAL

It is important to the State Department of Public Welfare to maintain a good working relationship with the Indiana University Medical Center. If

it is determined through the DPW Form 57, Essential Eye Treatment Data, or through clearance with the social service department of the Indiana University Medical Center, that an individual is attending eye clinic or anticipating surgery for the eye at either hospital, the person should be urged to continue his attendance at that hospital. The university hospital has the prerogative to refer a case to the State Department of Public Welfare if they so desire. The hospital authorities can best decide whether the individual who is attending their clinic and is on their waiting list can be cared for in the hospital at the proper time or should be referred for care to the state department. If it is designated on the DPW Form 57, Essential Eye Treatment Data, that the person is in need of hospitalization and prefers that the state department arrange such, a release may be obtained from the Indiana University Medical Center. Any cases of an emergent nature are rightfully the responsibility of the township trustee.

XII. RESTORATION OF EYESIGHT

Interpretation of Section 66 of The Welfare Act of 1936

Section 66 of The Welfare Act provides that no assistance shall be granted or continued to any blind person who refuses medical, surgical, or other treatment when his eyesight may be partially or wholly restored by such treatment.

It has been the policy of the state department to place a liberal interpretation on this section of The Act, for it was felt that this section could not be made to apply in every instance. It was therefore established as a state department policy that if an individual is young, employable, and has dependents, and refuses treatment which would make him an employable person, or put him in a position to accept the responsibilities as created by his family, failure to accept such treatment should result in a rejection of his application or a withdrawal of blind assistance. Also if the individual has a communicable disease which may be affecting the eye health of others, or constituting a public health problem, he should be made to accept treatment before becoming a recipient of monthly blind assistance, or, if already a recipient, be no longer entitled to receive blind assistance. However, in cases where an individual is aged, and is definitely not employable, and, because of physical disabilities, emotional instability, etc., is fearful of surgery, it is not considered advisable to insist upon treatment. The opinion of the state supervising ophthalmologist is given consideration in decisions on cases which should be required to undergo a treatment plan.

Form Prescribed by State Department of Public Welfare and Approved by State Board of Accounts

DPW Form 56

DEPARTMENT OF PUBLIC WELFARE

STATE OF INDIANA

REQUEST FOR EYE TREATMENT

For Use of State Department Only
Application No. B - ____ - ____ (Code / Serial)
Treatment Application No. ____
Date Received ____

TO THE STATE DEPARTMENT OF PUBLIC WELFARE:

I hereby apply to the State Department of Public Welfare for temporary assistance as provided in Section 67 of the Public Welfare Act of 1936 as amended.

According to _____ (Doctor), _____ (Address)
the eye physician who made my examination under date of _____,
eye treatment as prescribed by him is likely to prevent total blindness or restore eyesight.

_____
(Applicant's Signature in Full)

_____
(Name of Witness)

_____
(Address of Witness)

_____
(Address)

_____
(Name of Witness)

_____
(Address of Witness)

Form must be signed by applicant and witnessed by two persons who affix signatures and addresses.

Date _____, 19__.

Prepare in Duplicate: One copy State Dept.
One copy County Dept.

Form Prescribed by State Department of Public Welfare and Approved by State Board of Accounts

DPW Form 57 (Revised)

The County Department of Public Welfare

of _____ County

_____ Indiana

ESSENTIAL EYE TREATMENT DATA

Application No. B ____ - _____
Code Serial

Applicant's Name _____

Address _____
(Street and number) (City) (County)

1. The County Department makes the following recommendation:

   a. Doctor _____ as eye surgeon.
   (Name) (Address)

   b. Hospital _____
   (Name) (Address)

2. Information from eye surgeon

   a. Operating or treatment fee $_____

   b. Estimated cost of correcting glasses if required after treatment $_____

   c. Estimated number of days' hospitalization required _____

3. Information from hospital

   a. Cost of ward accommodations $_____ $_____
   per week per day

   b. If no wards, quote most reasonable room charge $_____ $_____
   per week per day

   c. Cost of operating room $_____

   d. Cost of special laboratory fee $_____

   e. Cost of drugs $_____

4. Cost of physical examination $_____

5. Cost of transportation from patient's home to treatment center $_____

6. Other Costs _____ $ _____ Total estimated costs $_____

7. Has the applicant ever been registered at Robert Long Hospital or Riley Hospital, either in the out-patient clinic or in the hospital? ___ Yes ___ No

   The above named person was admitted to _____ Hospital
   (Either Robert Long or Riley)

   on _____ from _____ County, for _____
   (Type of treatment)

_____
(Signature of County Director)

Date _____, 19___

Prepare in duplicate: Original State Department
Copy County Department

SECTION 7

REEXAMINATION OF EYESIGHT

I. GENERAL STATEMENT

In accordance with Section 65 of The Welfare Act of 1936, recipients of blind assistance shall submit to a reexamination of eyesight at least every three years unless excused therefrom by the state department, and at such other times as required to do so by the county or state department. These reexaminations are for the purpose of reestablishing eligibility, bringing special emphasis on eye treatment, and attempting to regulate the eye health of the individuals. They may be initiated either by the county department or the state department.

II. REEXAMINATIONS INITIATED BY THE COUNTY DEPARTMENT

Reexamination can be initiated at the request of the county department if in its opinion the individual's eligibility regarding the degree of blindness is questioned. The county department may also initiate reexaminations for individuals who they feel should be submitted to treatment if a reexamination is needed to determine the present advisability of treatment. In connection with the examinations initiated by the county departments, one of two forms will be used. If the individual is an applicant, the county department will continue to use DPW Form 44, Notice to Report to Eye Physician, even though the individual has had a previous examination, if a second eye examination is being requested for the applicant before eligibility has been definitely determined. Procedures for using DPW Form 44 are outlined in Chapter II, Section 1, Procedure Prior to Home Interview. DPW Form 44a is to be used in case of recipients only, who are receiving monthly blind assistance at the time the second eye examination is being requested.

In connection with reexamination of eyesight for recipients of monthly blind assistance, the county department will issue DPW Form 44a, Notice to Report to Eye Physician for Reexamination (see copy of form at end of this section). This form will be filled out in quadruplicate, the original to be sent to the state department, one copy to be sent to the recipient, one copy to the doctor, and one copy to be kept in the county department. The form is self-explanatory. The name of the county examiner will appear as the examining physician on DPW Form 44a, unless it is the desire of the county department to make a referral to the physician in an adjoining county, or unless they have requested the state department to recommend another examiner. If the county department wishes to have the examination made by a physician in the adjoining county, or wishes the help of the state department in making the selection of another physician, a request for information should be directed to the division of public assistance.

III. RE-EXAMINATIONS INITIATED BY THE STATE DEPARTMENT

A re-examination of eyesight may be requested by the state department upon the advice of the state supervising ophthalmologist or after a review by the division of public assistance of DPW Form 45, Physician's Report on Eye Examination. Second eye examinations initiated by the state department are made usually with the idea of clarifying eye reports because of conflicting diagnoses, incoherence in the eye reports, or because of a question regarding the visual ability as expressed in the medical diagnosis. Also, second eye examinations may be requested by the state department in order that the examiner may determine the value of a treatment plan. The state department may also request referee examinations when there is conflict between two physicians as to the degree of vision. Referee examinations may also be requested when there is a conflict in the medical diagnoses which involves the need for treatment. In other instances a referee examination may be requested when the physician has made a recommendation, subsequently changes his recommendation, and the validity of his own examination is questioned. In general, referee examinations are given only in medically debatable cases, while second eye examinations are requested at periodic intervals in order to redetermine eligibility.

When the state department initiates either a second eye examination or a referee examination for a recipient of assistance, the division of public assistance will issue an SDPW Form 1259, Notice to Report to Eye Physician for Re-examination. (See copy of form at end of this section.) This form is made out in the division of public assistance in quadruplicate, the original kept in the state department, one copy sent to the county department, one copy to the recipient, and one copy to the examining physician. This form is authorization to the examining physician to proceed with the eye examination, the results of which are recorded on DPW Form 45, Physician's Report on Eye Examination. The copies of the DPW Form 45 are then routed in accordance with instructions in Chapter II, Section 1, Procedures Prior to Home Interview.

Transportation costs for recipients of monthly assistance who are to travel from their homes to Indianapolis or some other city for a second eye examination cannot be paid by the State Department of Public Welfare directly. However, a temporary increase may be granted in the monthly assistance allowance to meet the travel costs. If this plan were followed, it would of course be necessary to defer the second eye examination until the increase in assistance could be approved. The recipient would be responsible for contracting for and paying transportation costs from such additional grant.

In some communities service clubs, such as Lions or Kiwanis have cooperated in paying transportation for recipients who must travel to a distant point for a second eye examination.

If employees of the county departments of public welfare drive recipients from the county to the point at which the examination will be made, as a part of their official duties, such employees must look to the regular county travel allowance for reimbursement.

Prescribed by State Department
of Public Welfare and State
Board of Accounts

DPW Form 44A

THE COUNTY DEPARTMENT OF PUBLIC WELFARE

of _____ COUNTY

_____ INDIANA

Application B-____ _____
Code Serial

Date _____

NOTICE TO REPORT TO EYE PHYSICIAN FOR RE-EXAMINATION

Name _____

Address _____

In accordance with Section 65 of The Welfare Act of 1936, as amended, which provides for periodic re-examination of eyesight, you are hereby requested to report for a re-examination to

_____
(Name of Eye Physician)

_____
(Address)

on _____
(Day of month)

at _____
(Time of day)

If you cannot report at this time, please notify the County Welfare Department immediately.

Signed - By Authority of the County Board of Public Welfare.

_____
County Director of Public Welfare

Prepare four copies; all copies must be signed.

1. Copy to recipient ___
2. Copy to eye physician ___
3. Copy to State Department of Public Welfare ___
4. Copy to County Department of Public Welfare ___

Prescribed by State Department
of Public Welfare and State
Board of Accounts

SDPW Form 1259

THE STATE DEPARTMENT OF PUBLIC WELFARE
141 South Meridian Street
Indianapolis, Indiana

Application No. B-_____
Code Serial

Date_____

NOTICE TO REPORT TO EYE PHYSICIAN FOR RE-EXAMINATION

Name_____

Address_____

In accordance with Section 65 of The Welfare Act of 1936, as amended, which provides for periodic re-examination as to eyesight, you are hereby requested to report for a re-examination to

_____
(Name of Eye Physician)

_____
(Address)

on _____
(Day of Month)

at _____
(Time of Day)

If you cannot report at this time, please notify the State Department of Public Welfare immediately.

Signed - By Authority of the State Department of Public Welfare.

_____
Division of Public Assistance

Prepare four copies; all copies must be signed.
1. Copy to Recipient
2. Copy to Eye Physician ☐
3. Copy to State Department
4. Copy to County Department ☐

P-2804_7-21-38

CHAPTER IV

SECTION 8

BURIALS

I. GENERAL STATEMENT

The provisions of The Welfare Act contemplate that the payment of funeral services is an assistance grant for which the county welfare department is obligated only in the event there are no other available resources with which to meet the expenditure. Upon the death of a recipient of blind assistance, a county department must necessarily concern itself over the provisions which have been made for the recipient's burial. A blind person becomes a recipient of blind assistance on the effective date of his award.

Generally speaking, the payment of funeral expenses for a blind recipient will occur only in those cases in which the estate of the deceased recipient is insufficient and those legally responsible for his burial are able to pay none or only a part of the expenses of his burial.

II. PAYMENT UNDER PROVISIONS OF THE WELFARE ACT

A. LEGAL PROVISIONS FOR BURIAL

1. Provisions for Payment of Funeral Expenses

Payment by a county department of funeral expenses of a deceased recipient of blind assistance, exclusive of the burial lot, shall not exceed the sum of $75.00 as set forth in Section 61 of The Welfare Act. Payment of funeral expenses shall be made by the county department only when the estate of the deceased is insufficient to pay for such expenses or those persons legally responsible for his burial are unable to pay such expenses. In any case where the estate of the deceased recipient is sufficient, or those persons legally responsible for his burial are able to pay funeral expenses up to the sum of $75.00, the county department of public welfare will not be liable for any portion of the funeral expenses. Where the estate is sufficient, or those persons legally responsible for the burial are able to pay a part of the cost of the funeral expenses the county department is obligated to pay only the difference between such amount and $75.00. This includes insurance, lodge benefits, or any other resource available for burial.

2. Provisions for Payment of Expenses of Burial Plot

Payment by a county department for a burial plot of a deceased recipient of blind assistance shall not exceed the sum of $25.00, as set forth in Section 61 of The Welfare Act. Payment for the burial plot shall be made by the county department only when the estate of the deceased is not sufficient and those legally respon-

[illegible]

[illegible]

[illegible]

sible for payment of funeral expenses are unable to pay such expenses or when the burial plot is not available from some other source. In any case where the estate of the deceased recipient is sufficient or those legally responsible for his burial are able to pay up to the sum of $25.00 for the burial plot, the county department will not be liable for payment of any portion of its cost. When the estate is sufficient, or those legally responsible for the burial are able to pay a part of the cost of the burial plot, the county department shall pay only the difference between such amount and $25.00.

In those cases where a burial plot may be provided without purchase from public funds, but there are no other resources with which to make the plot available for use, the $25.00 allowed by statute for providing a burial plot, or such part of it as is necessary, may be used to defray:

a. Cost of opening grave
b. Cost of transportation of body where transportation involves travel outside usual and ordinary travel provided by undertaker.
c. Cost of a burial vault where plot is located in cemetery requiring use of container.

B. PROCEDURE DEPENDENT UPON SURVIVAL OF SPOUSE

1. Routine to be Followed When There is a Surviving Spouse.

When a recipient of blind assistance dies and leaves a spouse surviving, or dependent children, the county department may pay the undertaker's claim if the only asset of substantial value remaining is real estate, which is occupied by the spouse and/or dependent children.

If the decedent leaves personal property this must be taken into consideration in determining whether the undertaker can be paid, unless the personal property is of little value or unless it is of such a nature that the surviving spouse or dependent children must retain it for a continuation of the home. A life insurance policy, cash on hand, stocks and bonds, etc., would be assets which under ordinary circumstances should apply toward funeral expenses. Household furniture, clothing, and other personal property of inconsequential value ordinarily should not be considered available for payment of the undertaker's bill.

2. Routine to be Followed When There is No Surviving Spouse

When an undertaker presents a bill for the payment of funeral expenses of a deceased recipient of blind assistance who has left no

surviving spouse, or dependent children, the total value of his property, both real and personal, must be considered.

If the aggregate assets, including both real and personal property, in the estate will produce enough on sale to pay the expenses of administration, and the funeral bill, the claim of the undertaker should be rejected and the undertaker advised to look to that source for payment.

C. EXECUTION OF DPW FORM 33, APPLICATION FOR FUNDS TO DEFRAY BURIAL EXPENSES

DPW Form 33, Application for Funds to Defray Burial Expenses, is prepared in triplicate by the undertaker and constitutes a sworn statement of the costs of the funeral services rendered the deceased recipient. The undertaker submits two copies, properly executed, to the county department, keeping the third for his own files. Care should be exercised by the county department that the forms are properly filled out when they are submitted by the undertaker. Since DPW Form 33 is a sworn statement it may not be altered or revised once the oath has been administered. If it becomes necessary to obtain a corrected statement from the undertaker, new DPW Forms 33 should be properly executed. In any case where a new affidavit has been executed subsequent to action of the county board on the undertaker's claim, the original copies of DPW Form 33 should be attached to the latter affidavit.

The following entries should be examined carefully for accuracy and completeness:

1. Application Number. The type, code, and serial number should be given. This may be entered by the county department.

2. The name of the county and the location of county department. This information may also be completed by the county department.

3. Names of deceased - full name preferred.

4. Address of deceased - address of last residence.

5. Total cost of funeral expenses. The undertaker should enter here the total cost of the funeral services, excluding burial plot, given the deceased recipient.

6. Total cost of burial plot - actual cost.

7. Paid or to be paid by Insurance.

   " " Bank Balance

   " " Fraternal Organization

Paid or to be paid by Relatives or Friends

" " (Other - Specify)

Under each of these headings the undertaker must make some definite statement. If he has not received payment, from one of these sources and does not expect to receive payment, it is necessary that he enter the work "None", "Nil" or "0". Where these entries have been ignored or have been filled in with a dash or other indefinite mark, the forms should be returned to the undertaker for completion.

8. Total paid or to be paid by other than the county. The total shown under this heading should comprise the total of any amounts entered under the previous six headings and should represent the total resources to which the undertaker will look for payment of his claim other than from the county funds. Again, the undertaker is required to make a definite statement under this heading.

9. Amount requested from _____ county.

A separate entry should be made of the total payments expected of the county department for funeral expenses and for burial plot. The totals should represent the difference between any amounts payable under The Welfare Act and the amounts the undertaker expects to receive in payment for services from other sources.

10. Statement under oath

The undertaker, in signing the claims under oath, says that the statements which he has made upon the claim are a just and true account of services rendered and materials furnished; that the sum mentioned represents the entire cost of the funeral including all services, incidentals, disbursements, or payments of any kind in connection with the disposition of the body of the deceased recipient, and that to the best of his knowledge and belief sufficient funds to defray the total cost of services are not available from other sources.

The oath may be administered by a person having power of notary or by an employee of the county department who has been duly authorized to administer oaths for purposes of The Welfare Act. Care must be taken that the jurat of the notary or other person administering the oath is completely and properly executed.

D. EXECUTION OF DPW FORM 34, REPORT ON ASSETS AND LIABILITIES FOR BURIAL ALLOWANCE

DPW Form 34 is prepared by the county department and is a statement of verification of resources which may be available for the payment of funeral expenses and burial plot. The form is to be prepared in duplicate, one copy for county files and the second to be sent to the state department, together with a copy of DPW Form 33. Instructions for preparation of form:

1. Name of Deceased - (full name)

2. Sex

3. Address - (Address of last residence)

4. Date of Death - (Should be verified)

5. Was Deceased a War Veteran

6. Surviving Spouse, Children, and Other Legally Responsible Persons

   The name of each person who might have a legal responsibility or might feel a moral obligation for payment of all or part of the funeral expenses should be entered along with the requested identifying information. Each such relative should be contacted to determine his ability to assist in meeting the burial expenses and to determine whether he has made or plans to make some contribution to the expenses. Where the relative has only recently been seen by the county department or where he is known to be in straitened circumstances, it may not be necessary to pay him a personal visit. Such a case might be recorded in the form as follows: "John Smith-Spencer, Ind. - Son- 48 - Township trustee case - DPW Form 11." For each relative it is necessary that the form be completed as to ability to assist and how verified.

7. Life Insurance on Decedent

   The form is explanatory as to what entries are to be made under the heading. Where a deceased recipient is found to have insurance, it would be expected that the undertaker might look to this source for payment of burial expenses. If the deceased was found not to have been insured, the word "None" should be entered along with the source the visitor used in verification of that fact. The source of verification should be entered in any case.

8. Real Estate

a. A full description of any real property should be recorded under this heading, as it is necessary in determining whether there was sufficient equity in the property for the undertaker to look to the estate for payment of his claim. In some instances, where the entries under this heading do not give a full picture of the true circumstances, a supplementary statement should be made on a separate sheet of paper and attached to DPW Form 34. The subject of real property as related to the payment of burial claims is discussed more fully under Title B of this Section of the manual.

b. Did Decedent Own a Burial Plot?

This item must be answered, yes or no. When a claim is submitted for its payment, it is necessary for the visitor to verify that a burial plot was actually purchased.

9. Personal Property

a. Banks and Other Savings Institutions

The visitor should determine whether the recipient had any such cash resource set aside for payment of his burial expenses. This fact should have been disclosed at the time of investigation and reference to the case record would generally suffice as the visitor's source of verification. The word "None" and how verified should be entered in case no such cash resource is found to exist.

b. Other Personal Property Including Cash on Hand

The value of household furnishing and other kinds of personal property may generally be determined form the county assessment records on file in the assessor's office. This information should also be available from the case record. Where household furnishings include antiques, their assessed value given in the assessor's records may be less than their probable sale value. The visitor should refer to Item II, B, Procedure Dependent upon Survival of Spouse, in this section of the manual for further comments upon personal property. Any cash the recipient may have had on hand at the time of his death might be available for payment of funeral expenses and its disposition should be verified

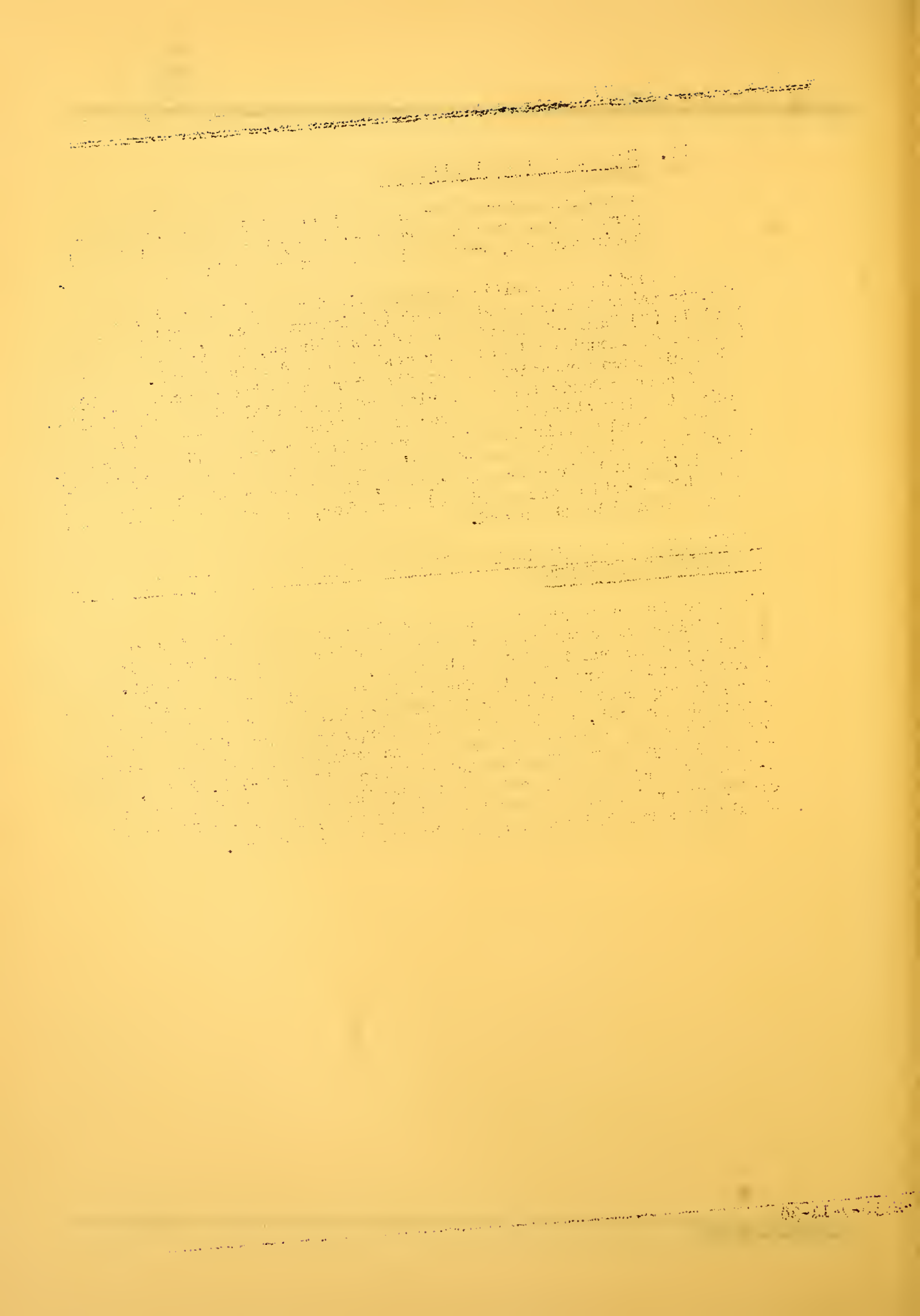
10. Expenses of Last Illness

A determination of expenses of last illness becomes important when personal resources may have been utilized in their payment, rather than in payment of burial expenses.

Upon completion of verifications required upon DPW Form 34, the visitor makes a summary statement (1) Amount of claim filed for burial; (2) Name of undertaker and his address, and (3) Total (verified) amount available for cost of decedent's burial. He then makes his recommendation to the director as to the amounts payable out of county funds for the burial and for burial plot. The visitor making the investigation and recommendation of payments to the director should affix his signature to both forms. After the county board has reviewed the undertaker's claim and the recommendation of the visitor and director for payment, the forms should be completed as to board action and county claim number, and signed by the director as ordered by the board.

E. PROCEDURE TO BE FOLLOWED IN PRESENTING BURIAL CLAIMS FOR REIMBURSEMENT FROM STATE FUNDS

The procedure a county department follows in presenting its claim for reimbursement out of state funds for burial expenditures is outlined in Accounting DPW Bulletin No. 9 and Regulation 2-703. DPW Forms 33 and 34 are closely checked by the division of public assistance, in any case in which reimbursement has been requested by a county department, to determine the adequacy of investigation and whether the expenditure was made in accordance with the provisions of Section 61 of The Welfare Act and Regulations 2-701, 2-702, and 2-703. In order to expedite action by the state department upon claims for reimbursement of funeral expenses, DPW Forms 33 and 34 should be submitted promptly by the county department.



Prescribed By State Department of Public Welfare and Approved by State Board of Accounts

DPW Form 33 (Revised)

DEPARTMENT OF PUBLIC WELFARE
STATE OF INDIANA

Application No. ____ - ____ - ____
Type Code Serial

TO THE COUNTY DEPARTMENT OF PUBLIC WELFARE
OF _____ COUNTY
_____ INDIANA

APPLICATION FOR FUNDS TO DEFRAY BURIAL COSTS
(Aged or Blind Recipients)

Name of Deceased _____

Address _____

Total Cost of Funeral Expenses Furnished.....$_____

Total Cost of Burial Plot Furnished.....$_____

....

Paid or To Be Paid by Insurance or Bank Balance.....$_____

Paid or To Be Paid by Fraternal Organization.....$_____

Paid or To Be Paid by Relatives or Friends.....$_____

Paid or To Be Paid by _____ $_____

Total Paid or To Be Paid by Other Than the County.....$_____

Amount Requested from _____ County Funeral Expenses $_____
Burial Plot $_____

State of Indiana)
County of _____) SS:

I, _____, the undersigned, being sworn according to law, say that the above is a just and true account of services rendered and materials furnished, that the sum mentioned represents the entire and only sum that will be charged or collected for the said funeral and burial plot, including all services, incidentals, disbursements, or payments of any kind in connection with the disposition of the body of the deceased, that to the best of my knowledge and belief sufficient funds to defray the total cost are not available from other sources, and that if public funds requested are granted, no further payment will be requested or accepted.

(SEAL)

Sworn and Subscribed to before me this

_____ day of _____ 19____

Signed _____

Address _____

_____
Notary Public
My Commission Expires _____

Prepare in Triplicate
1. Claimant retains one copy
2. File two copies with County Department which will forward one to State Department

(Claimant must also file claim on regular County Claim Form #17)

Prescribed by State Department of Public Welfare and Approved by State Board of Accounts

DPW Form 34 (Revised)

THE COUNTY DEPARTMENT OF PUBLIC WELFARE
OF _____ COUNTY
_____ INDIANA

Application No. - -
Type Code Serial

REPORT ON ASSETS AND LIABILITIES FOR BURIAL ALLOWANCE

1. Name of Deceased _____ 2. Sex _____

3. Address _____

4. Date of Death _____ 5. Was Deceased a War Veteran? _____

6. Surviving Spouse, Children, and Other Legally Responsible Persons:

Name	Address	Relationship	Age	Ability to Assist	Verified

7. Life Insurance on Decedent:

Company	Policy No.	Amount	Policy Held By	Beneficiary	Verified

8. Real Estate

A.

Address	Assessed Value	Taxes Due	Monthly Income	Balance Due Mtg.	Balance Due Int.	In Whose Name Is Property	Verified

B. Did decedent own a burial lot? ____ Lot used was purchased ____, Owned by relatives or friends ____, free ____, other (specify) _____

C. Give approximate amount of assistance received under 1936 Act _____

P-216a-12-21-39

9. Personal Property

A. Banks and Other Savings Institutions

Name	Address	Amount on Deposit	In Whose Name	Verified

B. Other Personal Property Including Cash on Hand

Kind	Value	Kind	Value	Kind	Value

10. Expense of Last Illness

To Whom Owed	Amount	For What	To Whom Owed	Amount	For What

Amount of Claim Filed for Burial $_____

Undertaker_____ Address_____

Total Amount Available for Cost of Decedents Burial $_____

Amount Recommended for Payment by Visitor for Burial $_____ For Burial Lot $_____ To Make Lot Available $_____

_____
Visitor

Amount Recommended for Payment by County Director for Funeral $_____ For Burial Lot $_____

I hereby certify in making this recommendation that the claimed amount has been determined in accordance with the Rules and Regulations and the Resolution of May 11, 1938 of the State Board of Public Welfare and the provisions of The Welfare Act of 1936 as amended and the statutes relating thereto.

$_____ was approved for payment
By County Board of Public Welfare at
Meeting Held_____
County Claim No._____

Signed by Order of the Board

_____
County Director of Public Welfare

Prepare in Duplicate
1. Copy State Dept. Public Welfare
2. Copy County Dept. Public Welfare

P-216a-12-21-39

SECTION 9

NOTICE TO PERSON LIABLE FOR SUPPORT

Section 94 of The Welfare Act of 1936 provides that nothing contained in The Welfare Act shall be construed to relieve any person from the liability of maintaining and supporting his parent or parents or child or spouse as provided by the laws of this state. This section also provides for the sending of a notice to the person liable for support, thereby making him liable to an action for recovery of all amounts paid to the recipient subsequent to the notice.

There are two situations in which this notice may be utilized: (1) where a legally responsible relative is able to support the applicant but refuses to do so and the state department enters an award of assistance; (2) when a legally responsible relative is not able to support the applicant at the time assistance is granted but subsequently becomes able to do so and refuses to offer any support to the applicant.

In the event that the state department of public welfare gives assistance when a legally responsible relative is able to support the individual but refuses to do so, there is nothing contained in Section 94 of The Welfare Act which makes suit against the responsible relative mandatory. This is a question of policy to be decided by the state board of public welfare in each case where such action seems advisable. The state department will send instructions to the county department as to the proper procedure to follow in such situations.

SECTION 10

APPOINTMENT OF RESPONSIBLE PERSON

I. GENERAL STATEMENT

The Federal Social Security Act specifically defines "Aid to the Blind" as money payments to blind individuals. The interpretation which the Social Security Board has placed upon this definition is to the effect that Federal reimbursement may be received only if payments of assistance are made directly to the blind recipient or to his legally appointed guardian. This policy of the Social Security Board does not permit further extension of the interpretation to include informally designated guardians.

Section 60 of The Welfare Act of 1936, as amended, provides that "If the recipient is a bliid person and is found to be incapable of taking care of himself or his money, the state department may designate a responsible person to whom the installments of the assistance shall be paid for the benefit of the recipient, and may prescribe such requirements as will secure the use of such funds for the sole benefit of the recipient."

Although it is not possible for the State of Indiana to obtain Federal reimbursement for those cases in which a responsible person has been appointed under the provisions of The Welfare Act, nevertheless, the state board of public welfare, recognizing the expressed need of the several county departments of public welfare for reinstatement of the responsible person procedure, has adopted regulation 2-601 which makes permissible the use of a responsible person procedure, for those instances in which the county departments believe that the applicants or recipients are incapable of spending their assistance grants in meeting their own need. The use of a responsible person may offer effective service in situations in which the applicant or recipient is an habitual drunkard, a spendthrift, or is physically or mentally incapable of handling his assistance grant, yet may not require institutional care. It is not mandatory that county departments make use of the responsible person procedure, but in any instance in which they believe that a responsible person should be appointed to safeguard the expenditure of the assistance funds of a blind assistance recipient, a recommendation to this effect should be made to the state department of public welfare.

Whenever a responsible person has been appointed for a blind assistance recipient, although the warrant will be made payable to the recipient and not to the responsible person, it will be mailed to the responsible person. In all instances, however, the recipient himself must endorse the warrant by signature or by mark since the appointment of the responsible person does not authorize that person to execute the signature of the person whose assistance he was appointed to supervise.

II. INSTRUCTIONS FOR FILLING OUT DPW FORM 50 (REVISED), APPOINTMENT OF RESPONSIBLE PERSON

If a county department wishes to recommend to the state department that a responsible person be appointed in any instance, DPW Form 50 (Revised), Appointment of Responsible Person, is to be used.

This form is divided into several sections, all of which must be completely filled in before the appointment may be effective. DPW Form 50 (Revised) should be prepared in duplicate with the first three sections filled in before the two copies are sent to the state department of public welfare for approval and signature of the administrator. After the administrator's signature is affixed, one copy is returned to the county department of public welfare, and the second copy is to be routed to the section of Accounts and Audits and returned to the Division of Public Assistance for filing in the case record of the recipient.

Section 1. The county director of public welfare has the responsibility of filling in the application number assigned to the applicant or recipient, the applicant's or recipient's name and address and the name and the address of the person he recommends to be appointed as the responsible person to supervise the care or handling of the assistance grant. The relationship of the responsible person named, to the applicant or recipient should also be listed.

Section 2. This contains the authorization of the applicant or recipient of blind assistance for the appointment of the responsible person designated to receive the assistance granted to him. The date should be the same as that on which the applicant or recipient of assistance signs. Provision is made for the witnessing of the signature and the date.

Section 3. This division indicates the consent of the responsible person mentioned above to act in this capacity.

Section 4. This section is to be signed by the administrator of the state department of public welfare and gives the administrator's approval of such an appointment. The name of the person appointed and the name of the recipient for whom the responsible person is to act also is filled in before the form is released by the state department.

FORM PRESCRIBED BY THE STATE DEPARTMENT OF PUBLIC WELFARE AND APPROVED BY STATE BOARD OF ACCOUNTS

DPW FORM 50 (REVISED)

THE STATE DEPARTMENT OF PUBLIC WELFARE
STATE OF INDIANA

APPOINTMENT OF RESPONSIBLE PERSON

APPLICATION NO. B ____ _____
CODE SERIAL

DATE _____

NAME OF APPLICANT OR RECIPIENT _____

ADDRESS _____
(STREET AND NO.) (CITY) (COUNTY)

FOR GOOD CAUSE SHOWN AND IN ACCORDANCE WITH THE PROVISIONS OF THE WELFARE ACT OF 1936 AS AMENDED

NAME _____ RELATIONSHIP _____

ADDRESS _____

IS HEREBY RECOMMENDED AS A SUITABLE PERSON UNDER THE REGULATIONS OF THE STATE DEPARTMENT TO RECEIVE AS ATTORNEY-IN-FACT THE MONTHLY PAYMENTS FOR ASSISTANCE TO THE ABOVE NAMED APPLICANT OR RECIPIENT.

SIGNED BY AUTHORITY OF THE COUNTY BOARD _____
COUNTY DIRECTOR OF PUBLIC WELFARE

I HEREBY AUTHORIZE THE APPOINTMENT OF _____
AS A SUITABLE PERSON TO RECEIVE AS ATTORNEY-IN-FACT THE ASSISTANCE GRANTED TO ME FOR MY USE AND BENEFIT.

DATE _____ _____
APPLICANT OR RECIPIENT

DATE _____ _____
WITNESS TO SIGNATURE

I HEREBY ACCEPT SAID APPOINTMENT AND AGREE TO DISBURSE SAID ASSISTANCE FOR THE SOLE USE AND BENEFIT OF SAID

_____ _____
APPLICANT OR RECIPIENT RESPONSIBLE PERSON

_____ IS HEREBY APPOINTED AS A SUITABLE PERSON UNDER THE TERMS OF THE WELFARE ACT OF 1936 AS AMENDED TO RECEIVE AS ATTORNEY-IN-FACT THE MONTHLY PAYMENTS FOR ASSISTANCE TO _____.

EFFECTIVE _____ 19__. SIGNED BY AUTHORITY OF THE STATE BOARD _____
ADMINISTRATOR

PREPARE IN DUPLICATE
ALL COPIES SIGNED
1. STATE DEPT. PUBLIC WELFARE TO BE RETURNED TO COUNTY DEPT. ☐
2. STATE DEPT. PUBLIC WELFARE ☐

P-108-5-25-39

SECTION 11

MEDICAL INFORMATION RELATED TO THE EYE

I. GENERAL STATEMENT

The adoption of a more detailed Physician's Report on Eye Examination, DPW Form 45 (Revised) and the advancement of the eye treatment program, has created the need for county visitors to be more familiar (1) with structural and functional parts of the eye, (2) diseases of the eye responsible for blindness, (3) for a brief but comprehensive understanding of the generalized medical expressions in the planning of eye treatment.

II. GENERAL INFORMATION

The general medical expressions discussed in this section are those frequently referred to on the Eye Physician's Report, DPW Form 45 (Revised), on the Decision of the State Supervising Ophthalmologist, SDPW Form 1256, and in correspondence with county departments when planning eye treatment.

A. CATARACT TEST

When cataracts are designated in the Eye Physician's Report, DPW Form 45 (Revised), as the cause of blindness, the state supervising ophthalmologist may approve a cataract extraction, but qualify his recommendation by a statement "contingent upon passing the cataract test". The test for cataracts consist of two parts: (1) ability of the patient to detect light projection; (2) ability of the patient to detect light separation. Test (1) means the ability of the patient to identify the direction from which a light comes. The person being examined is asked to point a finger toward the light as it is held by the doctor in various parts of the visual field area. Test (2), light separation, means the ability of the patient to identify when a light which in the beginning was a single light is separated into two distinct lights.

These tests are given so that it can be ascertained that a patient still has some visual acuity before proceeding with the operation. If an individual is totally blind, or has less seeing ability than needed to pass the tests, surgery is considered inadvisable. If the vision is gone, there is nothing to restore by operation. Cataracts in themselves do not cause total blindness, and when the person has no sight it is reasonable to conclude that there is another eye condition present which keeps the patient from seeing light. Since the cataract is in the lens, and is furthermore not transparent, the medical examiner cannot see through into the back part of the eye, and may therefore not be able to determine what other disease is present, or if any functional changes or degenerations have taken place. It is to be remembered that a cataract in the lens appears like a scratched piece of glass, and, no matter how many scratches, it always admits light.

B. HOSPITAL CARE FOR CATARACT PATIENTS

Hospitalization for cataract cases covers a period of ten to fourteen days. The patient is admitted the day prior to surgery, and is given routine tests, and special eye care (if necessary). The cataract extraction is usually done under local anesthetic, and the cooperation of the patient is needed during the operation. It is considered inadvisable to refer for surgery patients whose ability to cooperate is questioned, or whose hearing is so seriously impaired that the doctor's instruction may not be followed. Following the operation, the patient must not move for a period of eight to ten hours, and absolute quiet must be observed for a period of four days following surgery. Privileges will then be determined by the doctor. Strains of all types must be avoided during the recovery period and smoking tobacco, chewing, etc., may be contraindicated by the individual doctor.

Eye bandages or eye masks are considered an essential protection for the operated eye, and the other eye may be bandaged also. These cause no discomfort to the patient. Precaution should be taken so that the patient will not take cold following his release from the hospital, and if members of the family, or county department are calling for the patient, it is preferable that the automobile be heated in the winter months. If such is not obtainable, train is suggested as the best mode of transportation. Members of the family should be advised against permitting the patient to sleep in an entirely unheated room on his return home. Time of the postoperative examination will be determined by the physician, but if the patient has any pain, following his release from the hospital, he should immediately communicate with his surgeon.

C. SULFANILAMIDE THERAPY

Sulfanilamide is a new oral medication to be used in the treatment of trachoma. Contrary to the former medication plans where it was necessary for a patient to be hospitalized to receive sulfanilamide treatment, the patient now may be treated in his own home; the drug, of course, being administered under the direction of a physician. The sulfanilamide tablets are given in connection with sodium bicarbonate, and the amount and frequency of dosage is to be determined by the doctor. In some cases the drug may be given intravenously, or drops instilled into the eye direct. The course of treatment covers a period of four to eight weeks, and should not be administered during a pregnancy or nursing period, or when an individual has a physical condition complicated by a kidney disturbance.

In rare instances the patients under sulfanilamide treatment experience some nausea, dizziness, and weakness, and if any symptoms of this type develop, the patient should immediately report the condition to his doctor, who can in turn alleviate such symptoms by a reduction in dosage amount, or temporary withdrawal. A pink or red

discoloration of urine or stools is due to the drug and not to blood.

III. CLASSIFICATIONS OF THE CAUSES OF BLINDNESS

In order to secure worthwhile statistics for future study and social study, a classification is being kept of all monthly assistance and eye treatment cases. This classification is divided into two divisions: (1) topographical classification, (2) etiological classification. A scheme of code numbers has been worked out which will facilitate the grouping of these cases according to either the etiological or topographical factor.

1. Topographical factor refers to the area of the eye affected, such as the eyeball, the crystalline lens, the cornea, etc. It incorporates also the nature of the disturbance in the area. For instance, specific eyeball disturbance such as glaucoma, inflammation of the eyeball, etc.

2. Etiological factor refers to the disease or accident which was fundamentally responsible for the primary eye condition, such as tuberculosis, trachoma, industrial injury, etc. If the individual has diabetic cataracts, the topography would be cataract, since the crystalline lens is the area affected; and the etiology would be diabetes, since this is the disease responsible for the cataract formation.

The primary eye condition would be that diagnosis which the doctor feels is primarily responsible for the reduction of sight. A secondary condition might be present, but this would be of incidental importance only. For instance, if an individual has glaucoma and cataract, if the cataract reduced the individual's vision to less than 20/200 and the glaucoma developed afterward, the primary blinding condition would be cataract, even though the secondary condition responsible for further loss of sight would be glaucoma. The above condition might be entirely reversed - the individual having as a primary eye condition glaucoma (hardening of the eyeball) and if cataract developed after the glaucoma, it would therefore become of only secondary importance for classification purposes. It would be of importance, however, for the doctor to know that both eye conditions were present before he planned any type of surgical or medical care.

IV. DEFINITION OF SPECIFIC TERMS

The brief glossary is for informative purposes for studying and interpreting eye physicians' reports and eye treatment plans. The definitions given represent only a fraction of the ophthalmic terms but the group selected is

representative of those terms most frequently used.

Acuity of Vision	The sharpness of central vision without or with correction. The sharpest acuity means the best vision the patient has with a proper correction by spectacle lenses.
Albinism	Lack of color in the iris. Abnormal deficiency of pigment in the iris and choroid; the "color" of the eye is pink (Pink eyed).
Amaurosis	A synonym for blindness and amblyopia.
Amblyopia	A dimness of vision.
Amblyopia ex anopsia	Loss of visual ability through non-use, such as with strabismus or crossed eyes. A type of functional blindness.
Aniridia	Absence of the iris.
Anopia	Absence of eyes or eye.
Aphakia	Absence of the crystalline lens.
Aqueous Humor	A transparent watery fluid which fills the anterior and posterior aqueous chambers of the eye. The iris separates the two chambers.
Asthenopia	Painful vision or uncomfortable use of the eyes.
Astigmatism	Defects of the refractive capacity of the cornea and lens because of which parallel rays of light cannot be focused into a single point, and therefore images, to an astigmatic eye, appear blurred.
Atrophy	A wasting away of a part from lack of nutrition.
Blepharitis	Inflammation of the margins of the eye lids.
Cataract	Any opacity of the crystalline lens or capsule of the lens: 1. Capsular cataract: an opacity of the lens capsule. 2. Cortical cataract: that condition in which

	the outer layers of the body of the lens lose transparency.
	3. Secondary cataract: a cataract that sometimes appears after the extraction of the lens.
Chalazion	A kind of tumor of the eye lid.
Chamber	A term used in speaking of the three chambers: the anterior and posterior aqueous, and the vitreous.
Choked Disc	Swelling of the optic disc or nerve head.
Choroid	The pigmented blood-vessel coat of the eyeball.
Choroiditis	Inflammation of the choroid.
Chorioretinitis	A disease caused by inflammation or degeneration of the choroid and retina.
Cilia	The eyelashes. A cilium is a single eyelash.
Coloboma	A keyhole-shaped pupil when it affects the iris; a tear or break in any structure of the eyeball, as the iris, choroid, retina, optic nerve, or lens.
Congenital	Existing at birth, but not necessarily a feature of heredity.
Conjunctiva	The mucous membrane lining of the eyelids and covering the eyeball.
Conjunctivitis	Inflammation of the conjunctiva.
Consanguinity	When parents are blood related.
Cornea	The transparent coat of the eyeball in front of the iris and pupil; it admits light.
Crystalline lens	The lens of the eye; it resembles a crystal and is enclosed in the lens capsule which is held in position by the suspensory ligament. The lens focuses light on the retina.

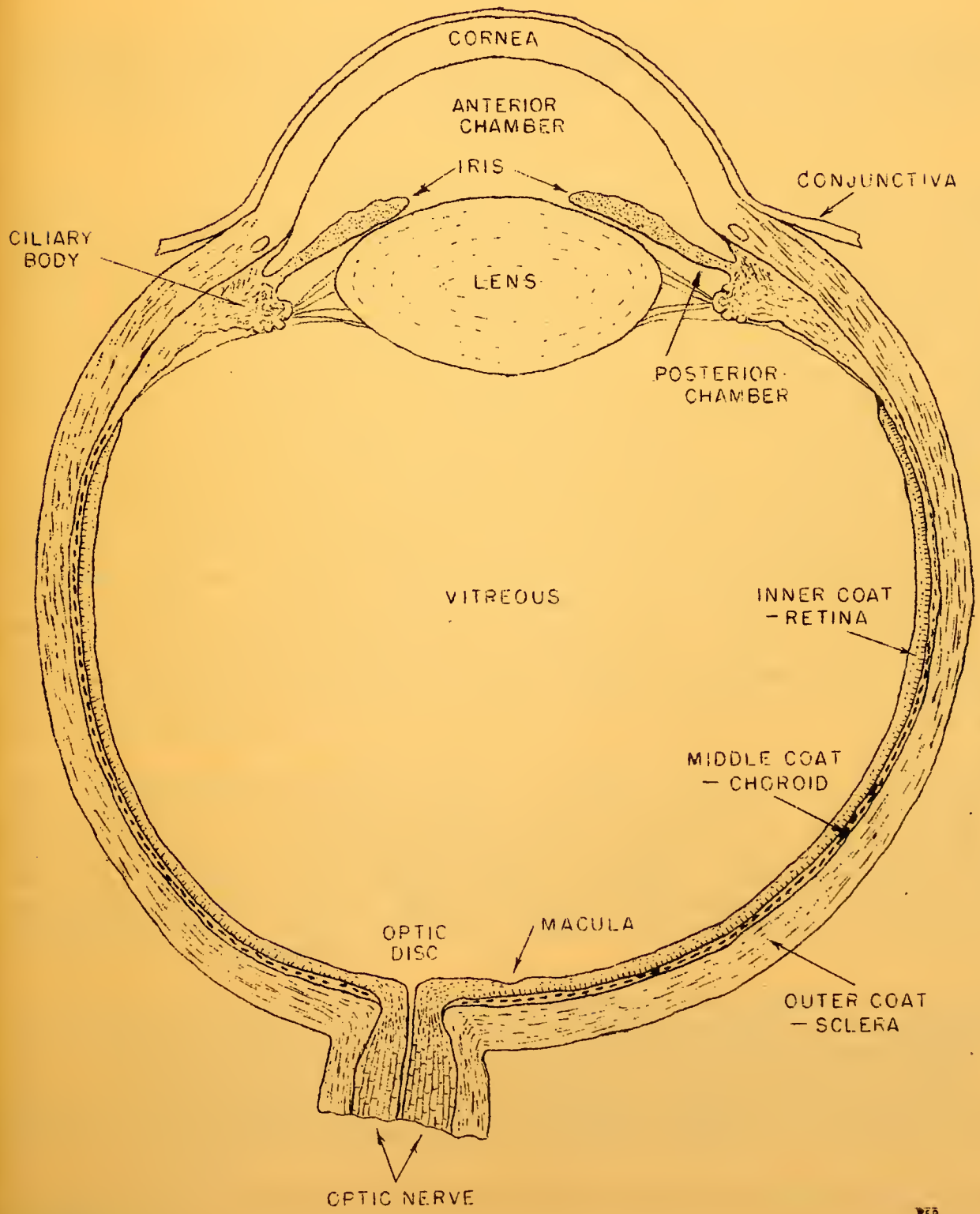
Discission	The rupture of the capsule of the crystalline lens in the operation for a soft cataract or a secondary cataract.
Districhiasis	A double row of cilia.
Ectasia	A bulging of the entire cornea.
Ectropion	Turning out or eversion of the eyelid or eyelashes.
Entropion	Turning in or inversion of the eyelid or eyelashes.
Enucleation	Operation for the removal of the eyeball.
Field of Vision	The area of the space which the eye can see while gazing at a fixed object within the area.
Fundus	It is seen by the means of an ophthalmoscope; namely, the retina, blood vessels, choroid and optic disc, collectively.
Glaucoma	Hardening of the eyeball. The characteristic feature of the disease is an increased intraocular tension. It results in eventual blindness.
Globe	The eyeball.
Gonorrheal Ophthalmia	Eye inflammation due to the gonococcus.
Hereditary	Derived from ancestry or obtained by inheritance.
Hyperopia	Far or longsightedness.
Interstitial Keratitis	Inflammation of the substance of the cornea, mostly due to syphilis.
Intraocular	Situated within the globe of the eye.
Iridectomy	The operation for removing a piece of the iris for the reduction of increased intraocular pressure (or tension) of the eyeball in cases of glaucoma, thus producing a deformed pupil or an additional pupil.
Iridocyclitis	Inflammation of the iris and ciliary body. Sometimes called uveitis.
Iris	The pigmented muscular membrane which determines the color of the eye and the size of the pupil.
Iritis	Inflammation of the iris alone.

Keratoconus	The center of the cornea is protruded forward, cone-shaped.
Lens	The body behind the pupil that bends rays of light to a focus on the retina to form images.
Leukoma (Leucoma)	White spot on the cornea.
Megalophthalmus	An enlarged eyeball.
Microphthalmus	An under-developed or eyeball diminished in size.
Mydriatic	A drug that dilates the pupil.
Myopia	Short sightedness or near sightedness.
Neoplasm	A tumor or new growth.
Neuroretinitis	Inflammation of optic nerve and retina.
Night blindness	A condition where a person does not possess normal night vision.
Nystagmus	Habitual short jerking movements of the eyeball which are rythmically repeated.
Opaque	Impervious to light; not transparent.
Ophthalmia neonatorum	A form of pus conjunctivitis which attacks newly born infants.
Optic Atrophy	Atrophy of the optic nerve with partial or total loss of vision.
Optic Disc	The nerve head within the eye.
Optic Neuritis	Inflammation of the optic nerve; usually it refers to the disc.
Orbit	The bony eye socket.
Pannus	Blood vessels invade the cornea. In trachoma, a membranous tissue usually covers the upper half of the cornea, making it almost opaque. Pannus is found in active interstitial keratitis and ulcers of the cornea.

Panophthalmitis	Abcess of the entire eyeball.
Pathological	Pertaining to diseased conditions of tissues or organs.
Periphery	The farthest part from a center, such as the edge of the cornea or crystalline lens.
Phthisis Bulbi	Shrunken eyeball due to disease or injury.
Presbyopia	Impairment of near vision due to advancing years or old age.
Pterygium	A patch of thickened fleshy conjunctiva extending onto the cornea.
Retina	The intraocular membrane which receives the pictures that are formed within the eye by means of waves of light reflected from objects, and, through the medium of the optic nerve, the resulting visual impressions are transmitted to the brain.
Retinal Detachment	Separation of the retina from the choroid.
Retinitis	Signs of disease as they are developed in the retina.
Retrobulbar	Anything that is situated or occurs behind the eyeball.
Sclera	The external or white coat of the eyeball.
Scotoma	A blind spot or a dark spot in the field of vision.
Staphyloma	A bulging of the cornea or sclera, with uveal tissue incorporated.
Strabismus	Crossed eyes.
Sympathetic Ophthalmitis	Inflammation of one eyeball after injury to the other.
Trachoma	A disease that affects the membrane lining of the eyelid and covering the front of the eyeball; it is a granular form of conjunctivitis, hence, sometimes called granulated eyelids or eyes.
Trichiasis	A condition where the eyelashes, instead of extending forward, are directed backward so as to come in contact with the cornea.

Uvea or Uveal Tract	The iris, ciliary body and choroid collectively.
Uveitis	A condition in which the choroid, ciliary body and iris together are inflamed.
Vitreous Humor	A transparent colorless mass that fills the posterior or vitreous chamber; it constitutes about four-fifths of the contents of the eyeball.

HORIZONTAL SECTION OF RIGHT EYEBALL



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CHAPTER IV.

SECTION 12

TEMPORARY CARE IN A PUBLIC INSTITUTION

A recipient of blind assistance may enter a public institution for the purpose of receiving temporary medical, surgical, or nursing care without rendering himself ineligible for such assistance, unless it is obvious at the time of his admission that his condition will necessitate prolonged or permanent care, in which case he becomes immediately ineligible for continued assistance.

Whenever a recipient of blind assistance becomes a temporary resident of a public institution for the purpose of receiving medical, surgical, or nursing care, other than that provided by the eye treatment program of the State Department, a written report shall be obtained immediately by the county department from the medical officer of the institution giving diagnosis, prognosis, and recommendations for further treatment. This report must be retained in the case record. If the report indicates that the recipient will need care in the institution for not more than one calendar month from the date of admission, it may be unnecessary to recommend a change in the award. If confinement in the institution will be for a longer period, the county department shall make an immediate reinvestigation in order to determine the extent of the recipient's needs during his temporary residence in such institution. If the individual's needs are being met entirely by the public institution during his residence there, the county department should recommend a suspension of his assistance. The recipient may have expenses, however, which are not being met by the institution, such as the maintenance of his home, insurance premiums, or other items of expense not met by the institution. In this connection, it should be pointed out that if the recipient has no way of meeting his own increased medical needs they can be met, either in whole or in part, by an increase in his award to the maximum amount permissible under the law, except that no allowance may be made for any care extended to the recipient by a county infirmary. If such a course is pursued, federal and state funds will then assume in full the cost of such necessary medical care up to a $30 maximum.

In no instance shall a county department recommend the continuance of assistance beyond the three months' period except upon written approval of the Division of Public Assistance. In requesting approval for an extension of time beyond the three months' period, county departments shall submit to the Division of Public Assistance a summary of the pertinent facts including a dated and signed statement of the medical officer of the institution giving diagnosis, prognosis, and recommendations for further treatment, together with a statement of the county department's recommendation.

In order that there may be no question about federal reimbursement, it is essential that the case record indicate clearly and affirmatively that the recipient is a resident or patient of a public institution for a temporary period which will not exceed three months and that he remains in need of blind assistance equal to the amount granted, or that the recipient's care in a public institution beyond the three months' period is with the written approval of the Division of Public Assistance.

CHAPTER V

SECTION 1

LIFE INSURANCE

CHAPTER V

LIFE INSURANCE

I. GENERAL STATEMENT

The purpose of the following material is to give the worker some definitions and a minimum of discussion upon the general subject of insurance. Much of the information hereinafter contained has been drawn from a pamphlet prepared by the Life Insurance Adjustment Bureau, entitled "Life Insurance, A Handbook for Social Workers." Every worker in each county department should have access to a copy of this handbook since it represents an extremely helpful digest upon the material and is somewhat more detailed in its presentation of factual material than has been possible under this title.

The main purposes of life insurance are to protect an earned income and to provide a fund for burial where no other resources are available. Consequently, in dealing with any insurance program upon a blind person the worker must bear in mind that any amount of insurance in excess of an amount sufficient for burial protection as represented by the standard resource allowance should be subject to close study as to the best possible means by which the policy or policies could be adjusted. Insurance generally represents a personal asset which can be converted into cash in an amount less than the face value of the policy, depending upon the amount of the policy and the number of years over which premiums have been paid.

Upon the recommendation of each county department the state department has approved a standard resource allowance in a sum of money sufficient to provide a reasonably fit burial in each county. The standard thus established represents the amount of insurance or other personal property an applicant for blind assistance may retain and be eligible to receive assistance. Wherever possible the insurance program of a blind person must be adjusted down to the amount of the resource allowance.

II. ADJUSTMENTS OF INSURANCE

The cash value of insurance an applicant for blind assistance might possess in excess of the standard resource allowance is considered a resource which the applicant would be expected to exhaust before becoming eligible for assistance. It may prove helpful to the county departments to consider these further reasons for the suggestion that adjustments should be made wherever possible.

A. Many applicants have a tendency to confuse the assistance granted under The Welfare Act with pensions and conclude that such assistance is something to which they are entitled regardless of the amount of their resources or the extent of their needs. As has been indicated, insurance is a resource and should be considered as such. If an applicant has a

policy on which he can obtain a substantial amount of cash over and above the standard resource allowance, it is desirable that such money be obtained through adjustment and expended. It is in the same category as money in the bank. To grant assistance before an adjustment was made in such a case would be to grant aid using insurance as collateral security. Such procedure would seem to imply that the nature of the aid given is that of a loan rather than assistance. It is not believed the provisions of The Welfare Act contemplate such use of public assistance funds.

B. Permitting an applicant to retain large amounts of insurance, while requiring him to dispose of other liquid assets, would tend to establish a policy discriminatory in its effect among applicants for assistance in the state.

C. If a recipient continues to pay premiums on an amount of insurance in excess of the standard resource allowance, he is merely attempting to insure the assistance granted him and in most instances would be paying premiums from his monthly assistance grants. It also might be pointed out that the recipient would be creating an estate in an effort to provide for dependents or relatives after his death for whom he was unable to provide during his life.

III. ADJUSTMENT OF INDUSTRIAL POLICIES

Industrial life insurance is that type of insurance generally purchased by wage earners or individuals within a low income group. Most of the policies issued under this class of insurance are for amounts less than $1,000, and some of them are for amounts less than $100. The premiums are collected at the home of the insured by agents. All policies upon which premiums are payable weekly and also some of those on which premiums are payable monthly belong in the industrial classification of life insurance.

Because of the limited terms of industrial policies, these contracts are not always amenable to adjustment. Policies issued by the Metropolitan, Prudential, and John Hancock companies, should be adjusted when necessary through the Life Insurance Adjustment Bureau, 450 Seventh Avenue, New York City. Copies of the forms to be used for such adjustments, with explanations of their use, are available upon written request to the state department.

Policies carried with companies other than those listed above can be adjusted in many cases by resorting to paid-up insurance. For example, an applicant may be paying premiums on a $300 policy which has been carried long enough that he can discontinue premium payments and procure, perhaps, $200 paid-up insurance. If this amount is not in excess of the standard resource allowance established by the county, it would not be necessary to make further adjustment in the policy. If, however, the amount of paid-up insurance were greatly in excess of the standard resource allowance an

attempt should be made to obtain an adjustment. If the policy is not adjustable, an assignment will not be required at this time.

(See Chapter II, Section 5, Standard Resource Allowance)

It may be that the applicant is carrying two or three small policies, in which case it might be feasible to retain one policy and to cash surrender the rest. Adjustment on these contracts will vary greatly, depending upon the factors involved. The adjustments suggested within this manual by no means exhaust those adjustments which may be possible. In all cases, of course, in which an adjustment is contemplated, the health condition of the applicant is a very important factor.

It should be borne in mind that industrial policies may not always be adjusted to the exact amount of the standard resource allowance. Where the adjusted policy will not exceed the amount of standard resource allowance by more than a few dollars, it will not be necessary to recommend further adjustment of the insurance.

IV. ADJUSTMENT OF ORDINARY LIFE POLICIES

Ordinary life insurance is that classification in which policies are written for larger amounts of insurance, usually $1,000 or more. All policies upon which premiums are payable annually, semi-annually, or quarterly, and some upon which premiums are payable monthly, belong to this classification. Most ordinary life policies upon which premiums have been paid for a period of more than two years contain loan as well as paid-up and extended insurance values and can usually be adjusted through the local office of the insurance company. Oftentimes it is necessary to utilize a combination of these values in making the necessary adjustment, as for example, by taking part paid-up insurance and part cash, or by taking paid-up insurance in the full amount available, depending upon the amount approved by the state as the standard resource allowance and the amount of paid-up insurance which can be had.

V. FRATERNAL POLICIES

Fraternal policies (insurance provided by fraternal or similar organizations, extended only to members of the organization, and upon which premiums are usually paid from dues or special assessments) generally present something of a different problem from the classes of insurance more frequently encountered by the worker and in dealing with them, great care should be exercised to ascertain their exact status. Many of the fraternal policies encountered will provide extended, paid-up, and loan values and may be adjusted in much the same way as ordinary life insurance policies. The terms of the insurance contract, as set forth on the face of the policy will usually tell the worker if such values are available, but if there

still remains a question in the worker's mind resort should be made to the local representative of the company, who may be able to give the desired information.

In some cases where the fraternal policy does not provide for extended, paid-up, or loan values it may be possible to make some reduction in the face amount of the policy, say, from $1,000 to $500 or even to $250. Continuation of premium payments on such contracts will depend upon the amount of premiums involved and other facts in the case.

VI. GROUP INSURANCE

Group insurance is that class of life insurance in which a group of people, usually the employees of one employer, are insured under one policy. If the insured group are the employees of one employer, for instance, the policy is retained by the employer and each employee receives a certificate from the insurance company in which the benefits to which he is entitled are shown. The premiums are payable in some cases entirely by the employer and in other cases by the employer and employees jointly.

Due to the varying conditions under which policies are written, it is difficult to make any definite statements about group insurance policies. In practically all cases they are not susceptible to adjustment since they provide no extended, paid-up, or cash value. Continuation of this type of policy will usually depend upon the amount of premiums involved.

If a recipient has a policy of this sort, it should be examined to determine if any benefits are available because of blindness.

VII. INTERESTS OF ANOTHER IN INSURANCE

There will be those cases in which someone other than the insured, who is neither the lawful assignee nor the irrevocable beneficiary, claims an interest in or ownership of the insurance, by reason of a debt owed him by the insured or by reason of his having maintained premium payments upon the insurance for all or for a part of the time the insurance has been in force. The law provides, in effect, that, prima facie, insurance is the property of the insured, and that another person claiming its ownership or an interest in it must assume the burden of proving such ownership or interest. In such cases the county department through an examination of all the facts and circumstances shall determine whether the other has an interest in the insurance and whether such interest should be taken into consideration in any adjustments of the insurance. If the facts substantiate the claim of the other to an interest in the insurance proceeds, the insured shall be immediately informed of the extent to which such interest will be recognized by the county department. At that time the insured shall also be advised that unless this verified interest of the other is established by written assignment to him, the county department will consider the full amount of the insurance as a re-

source of the insured. In advising the insured that the interest of the other may be established through making him the lawful assignee of the insurance to the extent of his determined interest in the policy or policies, the insured shall also be informed that the intent of such a transfer of interest will not in itself be interpreted by the county department to render the insured ineligible for assistance.

In any case in which the county department, after examining all of the facts and circumstances, is unable to ascertain the extent of interest claimed by another in the insurance of an applicant or recipient, the question of the ownership of the insurance may be referred to the Division of Public Assistance of the State Department for opinion. In the event such an opinion is requested of the State Department, the request should be accompanied with a statement setting forth in necessary detail any evidence supporting or contradicting the contention of the claimant to an interest in or ownership of the insurance. After examining the facts as submitted, the Division of Public Assistance will inform the county department of its opinion as to the ownership of the insurance.

CHAPTER VI

SECTION 1

PRIVATE INSTITUTIONS

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I. STATUTORY PROVISIONS

The state department has interpreted the 1937 Amendments to Sections 52 and 95 of The Welfare Act of 1936 as providing in substance that an otherwise eligible blind person may receive assistance while he is residing in a private institution.

II. DEFINITION OF A PRIVATE INSTITUTION

A private institution within the meaning of The Welfare Act of 1936 as amended, and Regulation 2-901 is an establishment or home, not supported in whole or in part by tax funds, caring for five or more aged persons over the age of sixty and for blind persons over the age of twenty-one, regardless of whether or not the institution is operated for profit.

III. KINDS OF PRIVATE INSTITUTIONS

A. INSTITUTIONS OPERATED BY A FRATERNAL OR SIMILAR ORGANIZATION

A fraternal home is generally regarded as being any private institution operated by a fraternal or similar organization for the benefit of its membership only.

B. INSTITUTIONS OPERATED BY OTHER THAN A FRATERNAL OR SIMILAR ORGANIZATION

Under this classification of a home for the aged and/or blind is regarded any private agency which, incorporated or not, does not restrict its services to a particular group or class of the aged or blind and which generally is operated for financial gain. In some homes skilled nursing service is available, but more frequently such service is limited to practical nursing care. Where trained nursing service is not available, the home may offer satisfactory care for ambulatory residents and for those not in need of special services.

IV. THE PLACE OF THE PRIVATE INSTITUTION IN THE CARE OF BLIND PERSONS

In some instances it may be that care in a private institution is less desirable than other types of care available to a particular applicant or recipient. In other instances, institutional care may be the best way of meeting the needs of the individual whom the county and state departments are endeavoring to assist. There would perhaps be those blind persons who did not have homes of their own or homes available to them with interested relatives or friends, or who because of their blindness could not live alone and were in need of custodial care. Sometimes the facilities of a

private institution may be utilized in working out a temporary plan for the care of a blind person. In many instances, the worker will not be consulted in the decision a blind person makes to enter a private institution or, later, to leave it. Every worker should bear in mind that in the last analysis the decision as to where and under what conditions a blind person shall live is essentially his and must remain so. The need for individual case supervision will not be eliminated or made less necessary by the part the state department plays in the inspection of the institution. It should also be remembered that a private institution should not be expected to meet the needs of a blind person who requires services of a kind the institution is not equipped to give.

V. INSPECTION OF PRIVATE INSTITUTIONS BY THE STATE DEPARTMENT

Whenever a county department finds a blind recipient living in a private institution which has not been inspected by the state department, the county department shall immediately inform the state department of such institution in accordance with the provisions of Rule and Regulation 2-902.

A. LETTER TO BE SENT BY COUNTY DEPARTMENT

In any case in which a recipient of blind assistance is found to be residing in a private institution, which has not been inspected by the state department of public welfare, the county department shall send a letter to the state department notifying the state department that the institution has not been inspected.

B. ELIGIBILITY FOR ASSISTANCE NOT AFFECTED

Nothing in the procedure established by the state department for the inspection of private institutions shall be considered by the county departments to affect in any way the continuing eligibility of a recipient of blind assistance who is residing in a private institution which has not been inspected or does not pass the inspection of the state department.

VI. COMPUTATION OF COSTS IN FRATERNAL HOMES

Chapter 9 of Title II of the Rules and Regulations relative to recipients of blind assistance who are residents of private institutions operated by fraternal or similar organizations provides that after such an institution has been inspected, the state department will transmit to the county departments the items, and the cost of each item, to be considered in making an award of assistance to a resident of such an institution, and that county departments will use such cost figures in recommending the amount of assistance to be given to the applicant. During the course of the inspection of an institution operated by a fraternal or similar organization a statement of the costs of operation is secured.

State Department Rule and Regulation 2-903 provides that where the applicant is a resident of a fraternal or similar home operated for the benefit of its membership only, county departments shall grant assistance for only the personal items in the applicant's budget, if he is eligible. The personal items have been interpreted to be food, clothing (including personal upkeep), and medical care. The several costs of operation which have been used in determining the per capita cost of each of the personal items are included in the following list:

Food

Food by direct purchase
Sale value of farm produce consumed
Wages of cook
Cost of fuel used for cooking
Cost of refrigeration

Clothing (Including Personal Upkeep)

Clothing by direct purchase
Cloth and materials purchased
Shoes and shoe repair
Laundry and cleaning
Toilet articles and necessities
Barbering

Medical Care

Cost of drugs
Doctor's salary
Dentist fees
Nurse's salary

After these items of operation costs are taken from the complete cost statement, the per capitas for food, clothing (including personal upkeep), and medical care are computed on a monthly basis. The item of medical care will include complete care of the resident by the institution.

VII. DETERMINATION OF ELIGIBILITY OF RESIDENTS OF PRIVATE INSTITUTIONS

A. ACCEPTANCE OF APPLICATIONS FROM RESIDENTS OF PRIVATE INSTITUTIONS

Regulation 2-908 provides that when a resident of a private institution desires to file application for blind assistance, the county department of the county in which the institution is located shall be responsible for receiving the application and making recommendation to the state department for assistance to such resident if eligible in all respects.

B. RESPONSIBILITY OF THE COUNTY DEPARTMENT

By Regulation 2-908 the state department has provided that if an applicant for blind assistance resides in a private institution, the county department of the Indiana county in which the institution is located shall be responsible for receiving the application and making a recommendation to the state department. County departments should bear in mind, however, that a regulation of the state department of public welfare concerning residence for the purpose of obtaining blind assistance has no application in determining a blind recipient's eligibility for relief from the township trustee. This point is raised in connection with the problem of supplying emergency medical assistance to residents of private institutions who are living in an institution outside the county in which they have legal settlement. It would, of course, be possible to increase the amount of the blind assistance allowance to the maximum of $30.00 in an effort to meet full costs of medical service, but if this were not sufficient, or if hospital services were required, the township trustee serving the township in which the institution was located would have the responsibility of making up any deficiency in the costs of medical care. If the blind person has not been in the township for a sufficient length of time to acquire legal settlement, the township trustee would still be responsible for emergency medical care. In some cases where the township trustee has been included in the plan of placing a blind recipient in a private institution in a second county, he may be willing to continue his responsibility for meeting any excess medical costs. A good working relationship with interested township trustees and the inclusion of them in making such plans for a recipient's care, therefore, seems most desirable. Where a blind person has entered a private institution in a second county of his own volition, this may not be practical or possible. It is to be noted, also, that this problem is not present in those cases in which the blind person takes up residence in the private institution operated by a fraternal or similar organization which has a medical plan for its residents. As has been pointed out, in those cases the assistance budget usually includes a medical item which meets the resident's full medical needs.

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RULES AND REGULATIONS
FOR THE
ADMINISTRATION OF ASSISTANCE TO THE BLIND

ADOPTED AND PROMULGATED
BY THE
STATE BOARD OF PUBLIC WELFARE
STATE OF INDIANA

DEPARTMENT OF PUBLIC WELFARE, STATE OF INDIANA
THURMAN A. GOTTSCHALK, ADMINISTRATOR

TITLE II - ASSISTANCE TO THE BLIND

Chapter 1
APPLICATION FOR ASSISTANCE TO THE BLIND

Regulation 2-101 Application for assistance to the blind shall be made on DPW Form 40, "Application for Assistance to the Blind", prescribed by the state department and approved and adopted by the state board of accounts.

2-102 A separate application shall be filed for each blind person. Where two or more blind people are living together, a separate application shall be filed for each person.

2-103 Application blanks may be sent by mail by the county department upon request or they may be given to friends or relatives of prospective applicants.

2-104 Applications must be verified by the oath of the applicant in accordance with Section 55 of The Welfare Act of 1936. Such oath may be taken by any person authorized by law to administer oaths or by any employee of the county department who has been authorized in writing by official action of the county board to administer oaths as prescribed in Section 30 of The Welfare Act of 1936. No charge shall be made by any employee of the state or county department for administering oaths to applicants or recipients of blind assistance or in the performance of their official duties.

2-105 All applications shall be made in duplicate, both copies identical, and each signed by the applicant and verified by oath. One copy of the application shall be sent to the division of public assistance of the state department by the county department not later than seven days after date of filing with the county department.

Regulation 2-106 Every application for assistance to the blind, upon receipt by the county department, shall be marked with the date of the filing and shall be given a serial number, the first application being numbered 1, the second 2 and so on continuously without change at the end of the calendar or fiscal period. Preceding the serial number and separated by a hyphen will be shown the prefix "B" and the county code number separated by a hyphen. (For example, B-20-49).

An application received from any person who has previously made an application for assistance to the blind under The Welfare Act of 1936 shall be given the same application number as given to the original application of such person. The application number shall be used on all other records, checks, warrants, vouchers and official documents referring to the person from whom the application has been received.

2-107 Immediately on receipt of every application including reapplication, a record shall be made thereof on DPW Form 2B,"Register of Application for Assistance to the Blind", prescribed by the state department and by the state board of accounts.
(Revised Sept. 14, 1938)

2-108 Immediately after registering such application on DPW Form 2B, "Register of Application for Assistance to the Blind," DPW Form 3 (Revised), "Index Card", prescribed by the state department and by the state board of accounts, shall be made for each application. Such index card shall be filed alphabetically according to the last name of the applicant in the master card file of the county department.
(Revised September 14, 1938)

Regulation 2-109 Each application for assistance to the blind received by the county department shall be filed along with subsequent reports, papers, correspondence and other documents pertaining to the applicant's case, in a separate folder or jacket furnished by the state department. Such folder or jacket shall be placed in the files of the county department with one file arranged alphabetically or numerically for the folders of those persons who are receiving assistance and those whose applications have not as yet been acted upon, called the "Active File, Blind", and another file arranged numerically for those persons who have been denied assistance or assistance withdrawn, known as the "Inactive File, Blind."

(Revised Sept. 14, 1938)
(Revised August 5, 1941)
(Mailed Sept. 8, 1941)
(Effective Sept. 18, 1941)

2-110 Rescinded by resolution of State Board August 5, 1941.

2-111 Rescinded by resolution of State Board September 14, 1938.

Regulation 2-112 Where it is obvious that an applicant for assistance to the blind from information apparent on his application is not eligible for assistance, the director of the county department shall immediately notify the division of public assistance of the state department, using DPW Form No. 42, "Report on Applicant for Blind Assistance After Submission of Application", prescribed by the state department and approved and adopted by the state board of accounts. In no case shall a county department notify an applicant for assistance to the blind that his application is rejected, as this is the duty of the state department.

2-113 Information given on the application by the applicant shall not be changed or information added either by the applicant himself or by an employee of the county department after application has been notarized. If, after application has been accepted and a number given it by the county department, it is found that it has not been properly or completely filled out, a new application shall be made. No application form once accepted and numbered shall be destroyed. If it is necessary, as a result of the subsequent investigation, to have an applicant change information on his original application, a new application shall be made out.

2-114 Application for assistance as a blind person shall be made to the county department of the county in which the applicant resides, in accordance with the provision of Section 55 of The Welfare Act of 1936 as amended, rather than to the last county in which he had twelve months' continuous residence.

(Adopted May 11, 1938)

Chapter 2
INVESTIGATION FOR ASSISTANCE TO THE BLIND

Regulation 2-201 Within fifteen days after a county department has been certified by the State Department as being prepared to assume the duties assigned to it by the provisions of the Welfare Act of 1936, the county director shall submit to the division of public assistance of the State Department the names of one or more ophthalmologists or eye specialists who shall be physicians licensed to practice medicine, surgery, and obstetrics, and who shall hold the degree of Doctor of Medicine as set forth in Section 57 of the Welfare Act of 1936. The submission of such name or names shall be in triplicate upon DPW Form No. 43, "Recommendation for Appointment of Eye Physician." Two copies of DPW Form No. 43 shall be sent to the State Department, and one shall be retained in the county department. The state department, in accordance with Section 57 of the Welfare Act of 1936, must approve the appointment of ophthalmologists or eye specialists qualified to make eye examinations as recommended by the county departments. No county department shall use an ophthalmologist or other person qualified to make eye examinations unless his appointment has been approved by the State Department. A member of a county board of public welfare is not eligible to serve as an eye physician for the blind assistance program.

(Revised August 10, 1938)

2-202 The State Department of Public Welfare, acting by virtue of the authority granted it by Section 57 of the Welfare Act of 1936, fixes the fee to be paid approved ophthalmologists or other approved persons qualified to make eye examinations of applicants for assistance to the blind at five dollars ($5.00) per examination subject to revision by the state department.

2-203 If from the face of the application it is not apparent that the applicant is ineligible, the county department shall send to the applicant a copy of DPW Form No. 44, "Notice To Report to Eye Physician", prescribed by the State Department and approved and adopted by the State Board of Accounts. This form shall be made in quadruplicate, one copy to be sent to the applicant, one copy to be sent to the ophthalmologist or other person who will conduct the eye examination and the one copy to be sent to the division of public assistance of the State Department along with the results of the eye examination as provided in State Department Regulation 2-204, and one copy to be retained in the office of the county department to be filed with other papers pertaining to the case.

Regulation 2-204 After an examination by a designated ophthalmologist or other approved person, the county department shall require the results of such examination to be reported by the ophthalmologist or other approved person on DPW Form No. 45, "Report of Eye Physician", prescribed by the State Department and approved and adopted by the State Board of Accounts. DPW Form No. 45 shall be made in triplicate, one copy to be retained by the ophthalmologist or other approved person making the eye examination, one copy to be sent by the county department immediately upon receipt to the division of public assistance of the State Department along with DPW FORM No. 44, and one copy to be retained in the office of the county department to be filed with other papers pertaining to the case.

2-205 If the results of the eye examination show that the applicant is not eligible for assistance to the blind as set forth in Section 1, sub-section "o" of the Welfare Act of 1936 the county department shall notify the state immediately by means of DPW Form No. 46," Report on Applicant for Blind Assistance After Eye Examination", prescribed by the State Department and approved and adopted by the State Board of Accounts. DPW Form No. 46 shall be made in duplicate. One copy shall be sent to the division of public assistance of the State Department and one copy shall be retained in the office of the county department to be filed with other papers pertaining to the case. In no case shall a county department notify an applicant for assistance to the blind that his application is rejected, as this is the duty of the State Department.

2-206 If the results of the eye examination show that the applicant is eligible for assistance to the blind as set forth in Section 1, sub-section "o" of the Welfare Act of 1936, the county department shall promptly secure from the applicant and those knowing his circumstances information supporting his application. Such information shall be set forth on DPW Form No. 4, Revised, "Face Sheet" and DPW Form No. 5, Revised, "Statement of Verification", prescribed by the State Department and approved and adopted by the State Board of Accounts and in the narrative record.

(Revised September 14, 1938)

2-207 Rescinded by resolution of State Board, September 14, 1938.

2-208 Rescinded by resolution of State Board, September 14, 1938.

2-209 Rescinded by resolution of State Board, September 14, 1938.

Regulation 2-210 When a county department finds that a person legally responsible for the support of the applicant lives in another county of the state, the county department shall ascertain the ability of such person to support the applicant by writing a letter to the county department in which the child or other person resides, enclosing a copy of DPW Form No. 11, "Data from Responsible Relatives", and requesting the county department to contact the person and have him fill out DPW Form No. 11 and to secure such other information about his circumstances as may be pertinent. Such information shall be returned to the county department of the applicant's residence. If a county department is unable to locate such a person it shall immediately notify the county department from which the request came. All county departments shall give prompt attention to requests of such aid from other counties. This same rule applies to information which the county may desire to secure about other relatives of the applicant or about property of the applicant located in another county. When an applicant has a person legally responsible for his support living in some other county of the state no recommendation for assistance shall be granted to such applicant until written information is secured about the ability of such person, if located, to wholly or partially support the applicant.

2-211 When a county department finds that a person legally responsible for support of applicant lives in another state, the county department shall attempt to ascertain the ability of such child or person to support the applicant by mailing to him a copy of DPW Form 11, "Data from Responsible Relatives", Failure of the county department to receive within a reasonable time, a return of DPW Form 11 from a person residing in another state shall not prevent the applicant from being recommended as eligible for assistance, providing he meets all other qualifications.

2-212 The county department is expected to determine by personal interview the responsibility of persons legally responsible for the support of an applicant where such persons live in the county of the applicant and to place the results of such interview in the narrative record. DPW Form 11, "Data from Responsible Relatives", may be used in connection with such interviews.

(Revised September 14, 1938)

Regulation 2-213 Rescinded by resolution of State Board, June 13, 1941

2-214 Each county department shall recommend and submit to the state department for approval a standard resource allowance which shall be not lower than $150 nor in excess of $250. The approved standard resource allowance shall be used by the county department in determining the amount of intangible personal property which an applicant or recipient shall be allowed to retain without rendering him ineligible. Intangible personal property for the purpose of this regulation is defined as cash, securities, and the cash surrender value of life insurance.

Whenever the intangible personal property of an applicant or recipient is in the form of cash or securities, and is found to have a cash value in excess of the Standard Resource Allowance, the applicant or recipient must utilize the intangible personal property in excess of the Standard Resource Allowance before he obtains or continues to receive Blind Assistance.

Possession of life insurance with no cash surrender value or with a cash surrender value of less than or equal to the Standard Resource Allowance, shall not render the applicant or recipient ineligible. However, if the applicant or recipient's equity in life insurance has a cash surrender value in excess of the Standard Resource Allowance, he shall be ineligible until he cash surrenders the insurance and utilizes that portion of it which is in excess of the Standard Resource Allowance.

(Adopted September 14, 1938)
(Revised May 9, 1941)

Chapter 3
AMOUNT OF ASSISTANCE RECOMMENDED

Regulation 2-301 The amount of assistance recommended to any applicant shall depend upon the conditions existing in his case.

2-302 Every county department shall make and forward to the division of public assistance of the State Department, budget estimates for blind persons on DPW Form 19, "Budget Estimate" in accordance with procedures established by the division of public assistance of the State Department.

In addition, every county department shall adopt and submit to the division of public assistance of the state department for approval, a budget guide for blind persons on DPW Form 49 Revised, "Budget Guide for Blind Assistance", prescribed by the State Department, and approved and adopted by the State Board of Accounts. In adopting such a budget guide, county departments are urged to use the figures established on DPW Form 19, in accordance with procedures established by the division of public assistance. The division of public assistance shall have the power to approve or change any item of the budget guide submitted by the county department and such changes shall be binding upon the county department. The budget guide, after approval by the division of public assistance, shall be used by the county department as a basis for determining the amount of assistance to be recommended for blind persons within the county; and any deviations from the budget guide shall be adequately explained in the written record. The budget estimates and budget guide may be refigured and resubmitted to the division of public assistance whenever the county department feels that changes in commodity prices and living costs warrant such reconsideration or when requested to do so by the division of public assistance. Such revisions shall be used only after approval by the division of public assistance.

(Revised September 14, 1938)

2-303 No county department shall establish a fixed amount of assistance to be recommended for blind persons to be given to all applicants or large group of applicants regardless of their individual needs.

2-304 Rescinded by resolution of State Board, Sept. 14, 1938.

2-305 Rescinded by resolution of State Board, Sept. 14, 1938.

Regulation 2-306 On those classes of blind assistance cases which require by direction of the division of public assistance county board action, the procedure for such county board action should be as follows: The director shall submit his recommendation for action to be taken on each individual case to the county board by use of DPW Form 17, "Recommendations of County Director and Action of County Board of Public Welfare as to Rejections, Awards, Revocations, Etc." DPW Form 17 provides for the numbering of each recommendation serially. If the recommendations of the county director of public welfare fill up more than one page the recommendations may be entered on any number of sheets. Proper notations must be made on the sheets and each sheet numbered as indicated on the form. When DPW Form 17 consists of several sheets each separate sheet must be signed by members of the county welfare board. DPW Form 17, "Recommendations of County Director and Action of County Board of Public Welfare as to Rejections, Awards, Revocations, Etc." shall be made in duplicate. One copy signed by the county director of public welfare and by the county board shall be sent to the state department of public welfare. The other copy properly signed must be filed numerically as a part of the official record of the county board. In the minute book of the county board the action taken on each individual case shall be listed separately or a minute entry similar to the following made: "Recommendation #_____ as submitted by the County Director of Public Welfare was considered and action taken in each case as indicated on the official copy, Form DPW 17 as submitted, which was duly signed and sealed by the County Board and the Secretary ordered to file it with the official proceedings of the Board." When such procedure is deemed necessary by the county board of public welfare, it may by specific resolution, copy of which shall be duly certified to the state department of public welfare, provide that the several members of the county board of public welfare shall sign each copy of the last page only of each recommendation, all copies of the remaining pages of the recommendation to be signed by the county director of public welfare in the space provided for the signature of the members of the county board. Proper notations as to sheet numbers and recommendation number shall be inserted in the space provided on all copies of each sheet of the recommendation.

(Revised May 10, 1939)

Regulation 2-307 When any recommendation made to a county board by the county director concerning an award, change of award, rejection or withdrawal of assistance, is in any way altered by the county board, the reason or reasons for such change must be recorded on DPW Form 5a Revised. The officer of the board presiding at the meeting in which the change is made, must affix his signature to the reason or reasons for changing the recommendation of the director.

(Revised Sept. 14, 1938)

2-308 When an applicant for or recipient of assistance lives in the home of a legally liable son or daughter, or with his or her spouse, or son-in-law or daughter-in-law who lives with his or her spouse who is a child of the applicant or recipient, the county department shall make an investigation to determine the needs and resources of such relative before making a recommendation that assistance be granted. In measuring the ability of such relative to assist, his needs and those of his legal dependents, excluding the applicant or recipient, shall in each instance be determined. If the investigation reveals that the relative has resources in excess of his needs and those of his legal dependents, excluding the applicant or recipient, the amount of the surplus shall be deducted from the personal needs of the applicant or recipient in determining the amount of the assistance award. If the relative has resources sufficient to meet only his needs and those of his legal dependents, excluding the applicant or recipient, the personal items of the applicant's or recipient's budget shall be included and his share in the maintenance items of the home may be included in determining the amount of the award. If the relative's resources are insufficient to meet his needs and those of his legal dependents, excluding the applicant or recipient, the personal items of the applicant's or recipient's budget and his share in the maintenance items of the home shall be included in determining the amount of the award.

(Adopted Jan. 10, 1941)
(Effective June 1, 1941)

Regulation 2-309 (A) When an applicant for or recipient of assistance does not share the home of a husband, or of a legally liable son or daughter, or of a son-in-law or daughter-in-law who lives with his or her spouse who is a child of the applicant or recipient, the ability of all such relatives living within the state to assist the applicant or recipient shall be determined by the county department through an investigation of their needs and resources. If, after investigation, they are deemed able to support the applicant or recipient in whole or in part, the amount that they are deemed able to contribute shall be considered as a resource of the applicant or recipient even though they are unwilling and refuse to make such contribution.

(B) After the expiration of 60 days from the effective date of State Board action, where the application has been denied or where the amount of contribution from the relative has been considered as a resource in determining the amount of the award, if the applicant reapplies or the recipient requests a change in the amount of his award, the county department shall make another investigation. If it is ascertained that support has been actually withheld and the son, daughter, husband, son-in-law or daughter-in-law refuses to give such support, the county department shall recommend that assistance be granted to an otherwise eligible applicant or recipient in an amount sufficient to meet his needs without considering the ability of such relative to contribute as a resource.

(Adopted Jan. 10, 1941)
(Effective June 1, 1941)

2-310 When an applicant for or recipient of assistance has a legally liable son or daughter, or husband living in a state other than Indiana, the county department shall make an effort to determine the ability of such relative to assist the applicant or recipient in accordance with Regulation 2-211, and shall urge the relative to assist to the full extent of his ability. If, however, he refuses and withholds such support, the county department shall recommend that assistance be granted to the applicant or recipient if eligible in other respects, without considering the ability of such relative to contribute as a resource of the applicant or recipient.

(Adopted Jan. 10, 1941)
(Effective June 1, 1941)

2-311 For the purpose of administering blind assistance, any relative of the applicant or recipient, other than those specified in Regulation 2-308, may be considered as a morally responsible relative.

(Adopted Jan. 10, 1941)
(Effective June 1, 1941)

Regulation 2-312 When an applicant for or recipient of assistance lives in the home of morally responsible relative, the county department shall make an investigation to determine the needs and resources of such relative before making a recommendation that assistance be granted. In measuring the ability of such relative to assist, his needs and those of his legal dependents, excluding the applicant or recipient, shall in each instance be determined. If the investigation reveals that the relative has resources in excess of his needs and those of his legal dependents, excluding the applicant or recipient, he shall be urged to support the applicant or recipient to the full extent of his ability. If the relative is able but unwilling and refuses to provide for the personal items of the applicant's or recipient's budget, an award shall be made to cover the personal needs of the applicant or recipient, but in no instance shall maintenance items of the home be included in the award. If the relative has resources sufficient to meet only his needs and those of his legal dependents, excluding the applicant or recipient, the personal items of the applicant's or recipient's budget shall be included in determining the amount of the award. If the relative's resources are insufficient to meet his needs and those of his legal dependents, excluding the applicant or recipient, the personal items of the applicant's or recipient's budget and his share in the maintenance items of the home shall be included in determining the amount of the award.

(Adopted Jan. 10, 1941)
(Effective June 1, 1941)

2-313 When an applicant for or recipient of assistance lives apart from a morally responsible relative who is deemed able to contribute to his support, such relative shall be urged to contribute to the full extent of his ability. If he is unwilling, however, and refuses to contribute, the county department shall recommend that assistance be granted to an otherwise eligible applicant or recipient without considering the ability of the relative to contribute as a resource.

(Adopted Jan. 10, 1941)
(Effective June 1, 1941)

Chapter 4
SUBMISSION OF RECOMMENDATION TO THE STATE DEPARTMENT

Regulation 2-401 Rescinded by resolution of State Board, September 14, 1938.

Chapter 5
REMOVAL TO ANOTHER COUNTY

Regulation 2-501 If, as provided in Section 70 of The Public Welfare Act of 1936, a recipient of assistance to the blind secures from the state department, permission to move to another county, the state department will give notice to the county department of both counties concerned. The county department of the county to which recipient moves may be required at any time by the state department to make a reinvestigation of such recipient.

2-502 If an applicant for assistance to the blind moves to a second county prior to his becoming a recipient, the county department with which he filed his application shall notify the state department so that authorization may be given for the transfer to the second county of all records pertaining to the case. The second county, after receipt of the material from the first county, shall assign a new application number and shall become responsible for completing the investigation and making recommendation to the state department.

(Adopted May 11, 1938)

Chapter 6
RESPONSIBLE PERSONS

Regulation 2-601 If the county department believes that an applicant or recipient for assistance to the blind is incapable of taking care of himself or his money, the county department may recommend a responsible person to whom installments of assistance shall be given for the benefit of the applicant or recipient. The recommendation for the appointment of such responsible person shall be made by use of DPW Form 50, 'Recommendation of Appointment of Responsible Person - Blind Assistance', prescribed by the State Department and approved by the State Board of Accounts. Two copies of such form shall be prepared and forwarded to the Division of Public Assistance of the State Department, one copy of which will be returned to the county department for filing with other papers pertaining to the case.

(Revised April 12, 1939)

Chapter 7
BURIAL ALLOWANCE

Regulation 2-701 Payment by a county department of funeral expenses of a deceased recipient of assistance to the blind shall not, exclusive of the burial lot, exceed the sum of $75.00 as set forth in Section 40 of The Welfare Act of 1936. Payment of funeral expenses shall be made by the county department only when the estate of the deceased is insufficient to pay for such expenses or those legally responsible for the burial of the deceased recipient are unable to pay such expenses. In any case where the estate of the deceased recipient or those legally responsible for his burial are able to pay funeral expenses up to the sum of $75.00 the county department of public welfare will not be liable for any portion of the funeral expenses. Where the estate is sufficient or those legally responsible for the burial are able to pay a part of the cost of the funeral expenses the county department shall pay only for the difference between such amount and $75.00.

(Revised June 12, 1936)

2-702 Payment by a county department for a burial plot of a deceased recipient of assistance to the blind shall not exceed the sum of $25.00 as set forth in Section 40 of The Welfare Act of 1936. Payment for the burial plot shall be made by the county department only when the estate of the deceased is insufficient to pay for such expenses or those legally responsible for the burial of the deceased recipient are unable to pay such expenses. In any case where the estate of the deceased recipient or those legally responsible for his burial are able to pay for the burial plot up to the sum of $25.00 the county department of public welfare will not be liable for any portion of the burial plot. Where the estate is sufficient or those legally responsible for the burial are able to pay a part of the cost of the burial plot the county department shall pay only for the difference between such amount and $25.00.

(Revised June 12, 1936)

Regulation 2-703 An undertaker making claim for burial allowance including the burial lot shall make such claim on DPW Form 33, "Application for Funds to Defray Burial Cost", and also upon the regular county claim Form 17. DPW Form 33 shall be prepared in triplicate; two copies properly signed and notarized shall be filed with the county department. Following receipt of DPW Form 33 "Application for Funds to Defray Burial Cost", the county department will make an investigation of the claim and execute in duplicate DPW Form 34, "Report on Assets and Liabilities for Burial Allowance". After action has been taken by the county board of public welfare in approving or disapproving a claim for burial allowance, including a burial lot one copy of DPW Form 33, "Application for Funds to Defray Burial Costs", and one copy of DPW Form 34, "Report on Assets and Liabilities for Burial Allowance", shall be forwarded to the state department. The procedure to be followed in approving or disapproving a claim for burial allowance, including the burial lot, shall be the same as for approving any other claim payable out of county welfare funds.

(Revised June 12, 1936)

Chapter 8
GENERAL REGULATIONS

Regulation 2-801 Temporary absence from the State of Indiana of a recipient of Blind Assistance is defined as absence from the State because of a health condition, or where the recipient is on a visit with the intent of returning to the State and where the absence at any one time is not in excess of nine continuous months, such period to commence on the date recipient last left the State. A recipient of Blind Assistance shall become ineligible for continued assistance when he has completed a nine months' continuous period of absence from the State.

(Revised February 15, 1939.)

2-802 Rescinded by State Board of Public Welfare, August 11, 1937.

2-803 In any case where absence from the state has resulted in a withdrawal of assistance to a blind person, continued absence of the person from the state for a period of not in excess of three months from the effective date of withdrawal of assistance shall be considered temporary absence and shall not be deemed to interrupt continuing residence in the state, for the purpose of determining eligibility for assistance under The Welfare Act. Nothing herein contained shall be construed to conflict with or to alter the terms of regulation 2-801 or the provisions of Section 96 of The Welfare Act as amended.

(Adopted April 13, 1938)

2-804 The county department, as soon as it learns that a recipient of Blind Assistance is about to leave or has left the State, shall for the purpose of redetermining the needs of the recipient, direct an inquiry to the Interstate Correspondence Section of the State Department requesting an investigation of the circumstances under which the recipient will be or is living in the State to which he is going or has gone. As soon as it has been ascertained that a recipient has left the State, he shall be notified in writing by the county department through use of DPW Form No. 98 of his rights regarding temporary absence from the state. Five copies of DPW Form No. 98 shall be made: the original shall be mailed to the recipient; one copy to the Division of Public Assistance of the State Department; two copies to be enclosed in the letter that is sent to the Interstate Correspondence Section for forwarding to the State to which the recipient has gone; and one copy to be retained in the case record of the county department.

(Adopted February 15, 1939)

Regulation 2-805 No restriction, by either direct or indirect means, which assumes actual or implied control of any portion of a blind assistance award shall be imposed in any manner whatsoever by a member of the state or a county board, or a member of their respective staffs, upon any recipient of blind assistance in the expenditure of all or any portion of his grant. No recipient of blind assistance shall be required to produce receipts or verifying statements showing that portions of his blind assistance award have been spent in accordance with a prior verbal or written understanding with him.
(Adopted September 11, 1940)

2-806 No employee of the state or a county department, and no member of the state or a county board, shall guarantee personally, or in the name of the state or county department, or in the name of the recipient, the payment of any personal bill or account of any blind assistance recipient.
(Adopted September 11, 1940)

2-807 No employee of the state or a county department, and no state or county board member shall cash, negotiate, endorse or witness the signature on any blind assistance warrant, nor shall such employee or board member, even at the request of the recipient, handle any of the funds arising from the negotiation of such warrant, except for deposit to the state treasury in accordance with the established procedure.
(Adopted September 11, 1940)

Chapter 9
RESIDENTS IN PRIVATE INSTITUTIONS

Regulation 2-901 To be eligible to receive assistance to a blind person as referred to in Section 52 of The Welfare Act of 1936 as amended, while living in an institution, a person must be living in a private institution. A private institution within the meaning of The Welfare Act as amended and this regulation is an establishment or home, not supported in whole or in part by tax funds, caring for five or more aged persons over the age of sixty and/or blind persons over the age of 21, regardless of whether or not the institution is operated for profit.

(Revised September 15, 1937)

2-902 A county department of public welfare shall immediately inform the state department of public welfare of any private institution in which a recipient of blind assistance resides which has not been inspected by the state department, so that the state department may proceed to make an inspection of any such private institution in accordance with the provisions of Section 5, subsections (b) and (d), and Section 9, subsection (c) of the Welfare Act. The terms of this regulation shall in no way be interpreted to affect the eligibility for assistance of any blind person who resides in an institution which has not been inspected by the state department.

(Revised January 11, 1939)

2-903 Where an applicant is a resident of a private institution wherein his needs other than personal needs are met by the institution, as in an institution operated by a fraternal or similar organization which operates the institution for the benefit of its membership only, county departments shall recommend and the state department shall grant assistance for only the personal items in the applicant's budget, if he is found otherwise eligible for assistance. The state department will transmit to county departments the per capita allowable charge based on actual cost for such allowable personal item as charged by each private institution operated by a fraternal or similar organization. County departments shall use such figures in determining the amount of assistance to be recommended for the applicant and the state department shall be governed by such figures in determining the amount of assistance to be given to the applicant.

(Revised October 4, 1939)

Regulation 2-903a Before an inmate of an institution operated by a fraternal or similar organization which operates the institution for the benefit of its membership only shall be granted assistance, or assistance continued, it shall be necessary that the inmate make a showing that the institution requires of him payment for care in the institution.

(Adopted October 4, 1939)

2-904 Where an applicant is a resident of a private institution which does not restrict its service to members of a fraternal or similar organization, the county department shall recommend assistance based upon the needs and the resources of the applicant and the cost of maintaining such applicant in the institution. The state department will transmit wherever feasible the amount which the institution ordinarily charges for services to blind residents.

(Adopted August 11, 1937)

2-905 When any private institution has received from a blind resident money, property, or other valuable consideration for the care of such blind person, the value of such money, property, or other consideration shall be considered a resource and the applicant shall not be granted assistance until such resource is exhausted.

(Adopted August 11, 1937)

2-906 The assistance warrant for a recipient residing in a private institution shall be made payable to the recipient and its delivery shall not be conditioned on the performance of any duty, act, or agreement as to its expenditure not otherwise required of recipients living outside of an institution.

(Adopted August 11, 1937)

2-907 County departments or the state department shall not enter into any agreement with the management of a private institution which will insure to the management that the recipient will pay to the institution the monthly payment for care. Any agreement on the payment must be made solely between the management and the recipient. The recipient must be reserved the right to choose whether or not he wishes to remain in a private institution.

(Adopted August 11, 1937)

2-908 When a resident of a private institution desires to file application for blind assistance, the county department of the county in which the private institution is located shall be responsible for receiving the application and making recommendation for assistance to such resident if eligible in all respects.

(Revised January 12, 1938)

Chapter 10
SUSPENSION OF MONTHLY PAYMENTS OF ASSISTANCE TO BLIND PERSONS

Regulation 2-1001 When it becomes necessary to suspend monthly assistance payments to any recipient of blind assistance, a recommendation for suspension of monthly assistance payments shall be submitted to the State Department by the county department. In suspending monthly assistance, a Certificate of Change of Award for Assistance to the Blind, DPW Form 53, may be issued in the amount of no dollars ($0.00). During a period of suspension the case is to be considered as an active case by the county department and will not be removed from the active section of the blind assistance case files.

(Adopted July 12, 1939)

2-1002 The plan of suspension of monthly assistance payments of blind assistance shall be used whenever an otherwise eligible recipient is admitted to the county infirmary for temporary medical care, unless assistance is continued to the recipient during his stay in the infirmary in accordance with Regulation 2-1103.

In other instances, the plan of suspension of monthly assistance may be used if a recipient is found to be temporarily not in need of monthly cash payments but whose need continues for all other services to which an otherwise eligible recipient of blind assistance is entitled under the provisions of The Welfare Act and rules and regulations of the State Department. In no case is the plan of suspension of monthly assistance payments to be used where the recipient has been found to be clearly ineligible for any assistance under The Welfare Act. In all such instances of apparent continuing ineligibility, a withdrawal of blind assistance shall be recommended instead.

(Revised July 10, 1940)

2-1003 In connection with the procedure of suspension of monthly payments of blind assistance, the term "temporarily not in need" shall be defined as temporary support resulting from the subsistence needs of a recipient being temporarily met through short term employment, possession of limited resources, emergency or temporary hospitalization, or a visit in the home of relatives or friends. In any case where it is determined that a recipient's subsistence needs will be met for a period of time in excess of six months, a withdrawal of assistance shall be recommended, since such a plan is not temporary in accordance with the above definition.

(Adopted July 12, 1939)

Regulation 2-1004 The effective date of suspension of monthly assistance payments shall be the first day of the month following the date of issuance of the last warrant for payment of monthly assistance delivered to the recipient.
(Adopted July 12, 1939)

2-1005 A suspension of blind assistance shall in no instance be continued for a period of time in excess of six consecutive months, and reinstatement of assistance subsequent to the termination of the six-month suspension period shall be recommended only after the acceptance of a reapplication. If during the six-month period of suspension assistance is to be reinstated, a Change of Award shall be recommended, or if during the period of suspension the recipient is found to be ineligible for further assistance, a withdrawal of assistance shall be recommended by the county department effective the first day of the month in which ineligibility is discovered, except in case of death, in which case the effective date of withdrawal shall be the first day of the month following the date of death.
(Revised July 10, 1940)

CHAPTER 11

TEMPORARY RESIDENCE IN PUBLIC INSTITUTIONS

Regulation 2-1101 For the purpose of administering Blind Assistance, a public institution is defined as any place of residence affording shelter or care to two or more persons, which is managed in whole or in part by or through any public instrumentality, official or employee acting in an official capacity; or a place of residence which, by reason of the circumstances of its origin and charter or maintenance from public funds, may properly be termed a public institution; or a place of residence in which shelter or care is afforded by agreement with the State or any of its political subdivisions for a consideration of money or money's worth.

(Adopted May 14, 1940)

2-1102 An applicant for blind assistance residing in a public institution at the time of application shall be ineligible for blind assistance in accordance with Section 52 (d) of the Welfare Act as amended unless he leaves the institution prior to the first assistance payment or upon receipt of the first assistance payment. In no instance shall an applicant residing in a public institution at time of application receive two consecutive assistance payments prior to his removal from the institution.

(Adopted May 14, 1940)

Regulation 2-1103 A recipient of blind assistance may enter a public institution for the purpose of receiving temporary medical, surgical, or nursing care other than that provided through the eye treatment program of the State Department without rendering himself ineligible for such assistance, unless it is obvious at the time of his admission that his condition will necessitate prolonged or permanent care. Payments of awards that would normally fall within the first calendar month after admission to the institution may be continued to individuals receiving such temporary care or treatment, but payments continued beyond that time shall be made only on the basis of a written report retained in the case record, signed by the medical officer of the institution, giving diagnosis, prognosis, and recommendations for further treatment, including a statement as to the probable duration of the illness. In no instance shall a county department recommend the continuance of assistance beyond the three months' period except upon written approval of the Division of Public Assistance of the State Department of Public Welfare. In requesting approval for an extension of time beyond the three months' period, county departments shall submit to the Division of Public Assistance a summary of the pertinent facts including a dated and signed statement of the medical officer of the institution giving diagnosis, prognosis, and recommendations for further treatment, together with a statement of the county department's recommendation.

(Adopted May 14, 1940)

Chapter 12

REINVESTIGATION OF RECIPIENTS OF BLIND ASSISTANCE

Regulation 2-1201 At least once every twelve months on all Blind Assistance cases the county department shall make a complete recorded reinvestigation of all phases of eligibility which are subject to change, except required re-examinations of eye sight which may be ordered by the county department or the State Department at less frequent or more frequent intervals depending upon the advisability of re-examination in individual cases. In addition, county departments shall make more frequent reinvestigations where needed.

(Effective January 1, 1942)
(Adopted April 18, 1941)